P200000 22694

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION: HEALTHSOUTH	DOCTORS HOSPITAL, II	NC.
DOCUMENT NU	MBER: P20000022694		
	eles of Amendment and fee are su	bmitted for filing.	
Please return all co	orrespondence concerning this ma	tter to the following:	
	FREDNEL MAGNY		
		Name of Contact Person	1
		Firm/ Company	
	311 NW 72 TERRACE		
		Address	······
	MIAMI, FL 33150		
		City/ State and Zip Code	e
	FMAGNY8@GMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further informa	ation concerning this matter, pleas	se call:	
FREDNEL MAGN	NY	786	577-8943
Nai	ne of Contact Person		de & Daytime Telephone Number
Enclosed is a check	k for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
, L F	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Callahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of



HEALTHSOUTH DOCTORS HOSPITAL, INC.

2020 MAY -8 AM 8: 38

(Name)	Corneration on access	ntly filed with the Florida Dept. of State)
P20000022694	or Corporation as curre	inty fried with the Florida Dept. of State)
	(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
N/A		The new
name must he distinguishable and contain "Inc.," or Co.," or the designation "Contractered," "professional association,"	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address,		311 NW 72 TERRACE
(Principal office address MUST BE A S		MIAMI, FL 33150
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		311 NW 72 TERRACE
		MIAMI, FL 33150
D. If amounting the registered agent on	utton mariet and affice or	ldress in Florida, enter the name of the
new registered agent and/or the new		
Name of New Registered Agent	FREDNEL MAGNY	
	311 NW 72 TERRACE	
	(Florida	street address)
New Registered Office Address:	MIAMI	, Florida 33150
		(City) (Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		nt: r with and accept the obligations of the position.
	Jan	
	Signature of New	Registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Dog	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	MARK TARR	1200 BRICKELL AVE
Add			MIAMI, FL 33131
X Remove			
2) Change	P	FREDNEL MAGNY	311 NW 72 TERRACE
X Add			MIAMI, FL 33150
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			-
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A

. •

The date of each amendment(s) ac	N/A soption:, if other than
date this document was signed.	option:, it other than
N/A	
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed as partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
must be separately provided for	eroved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
	• •
	for the amendment(s) was/were sufficient for approval (voting group)
	• •
by N/A	(voting group)
by N/A Dated 1	(voting group)
by N/A Dated 1	(voting group)
by N/A Dated 1/20 Signature (By a di	(voting group) The state of the control of the con
Dated 1/2 Signature (By a'di selected	(voting group)
Dated 1/20 Signature (By a'di selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
Dated 1/20 Signature (By a'di selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
Dated 1/20 Signature (By a'di selected	(voting group) rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court
Dated 1/20 Signature (By a'di selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)