

# P10000102304

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6380

From: Account Name : PADRON AND ASSOCIATES INC.  
Account Number : I20060000156  
Phone : (305)818-0404  
Fax Number : (305)818-0898

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
THERA-PAIN CENTERS USA, INC.**

Certificate of Status	0
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Page Count	06
Estimated Charge	\$35.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 FEB 22 PM 2:22

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TB 2-22-11



February 22, 2011

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

THERA-PAIN CENTERS USA, INC.  
2097 W 76TH ST  
HIALEAH, FL 33016

SUBJECT: THERA-PAIN CENTERS USA, INC.  
REF: P10000102304

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The officer/director resignation is not needed. It is stated on the amendment to remove Ivis Pineiro-Ruiz. If you wish to have the officer/director resignation filed it is a \$35.00 filing fee.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown  
Regulatory Specialist II

FAX Aud. #: H11000046337  
Letter Number: 911A00004410

RECEIVED

11 FEB 22 AM 9:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Feb. 22. 2011 11:04AM

No. 0943 P. 2.

Articles of Amendment  
to  
Articles of Incorporation  
of

THERA-PAIN CENTERS USA, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P10000102304

(Document Number of Corporation (if known))

**FILED**  
2011 FEB 22 PM 2:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**  
*(Principal office address MUST BE A STREET ADDRESS)*

42 NW 27 AVE  
SUITE 419  
MIAMI, FL 33125

**C. Enter new mailing address, if applicable:**  
*(Mailing address MAY BE A POST OFFICE BOX)*

42 NW 27 AVE  
SUITE 419  
MIAMI, FL 33125

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

*Name of New Registered Agent:* ALBERTO SUAREZ MIRANDA

*New Registered Office Address:* 42 NW 27 AVE - SUITE 419  
*(Florida street address)*

MIAMI, Florida 33125  
*(City) (Zip Code)*

**New Registered Agent's Signature, If changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

  
Signature of New Registered Agent, if changing

**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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>PSTD</u>	<u>IVIS PINEIRO-RUIZ</u>	<u>2097 W 76TH STREET</u> <u>HIALEAH, FL 33016</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>PSTD</u>	<u>ALBERTO SUAREZ</u> <u>MIRANDA</u>	<u>2097 W 76TH STREET</u> <u>HIALEAH, FL 33016</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

ARTICLE X - DISCHARGE OF RESPONSIBILITY

IVIS PINEIRO-RUIZ AS INCORPORATOR AND PADRON & ASSOCIATES, INC. AS

INITIAL REGISTERED AGENT OF THIS CORPORATION ARE HEREBY RELEASED

FROM ANY AND ALL RESPONSIBILITY OF THE CORPORATION FROM THIS DAY

FORWARD AND ARE GUARANTEED HEREBY TO BE HELD-HARMLESS AND

TO BE DEFENDED BY SAME FOR ANY ACTIONS TAKEN AGAINST THEM.

**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)*

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The date of each amendment(s) adoption: JANUARY 1, 2011

*(date of adoption is required)*

Effective date if applicable: JANUARY 1, 2011

*(no more than 90 days after amendment file date)*

Adoption of Amendment(s) **(CHECK ONE)**

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_"  
*(voting group)*

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 02/19/11

Signature 

*(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)*

Alberto Suarez Miranda  
*(Typed or printed name of person signing)*

PRESIDENT

*(Title of person signing)*