LC4000051121

		
(Re	questor's Name)
(Ad	dress)	
(Ad	dress)	
-		
(Cit	y/State/Zip/Phor	ne #1)
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PICK-UP	WAIT	MAIL
		<u></u>
(Bu	siness Entity Na	ime)
(Do	cument Number	7)
Certified Copies	Certificate	es of Status
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Special Instructions to	Filing Officer:	dr.M
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TRANSMITTAL LETTER

TO: Registration S Division of C			
SUBJECT: REHAB	SOLUTIONS, LLC		
	(Name of Lin	mited Liability Company)	-
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	spondence concerning this matter	to the following:	
	·	oher V. Salomoni	
	4)	Name of Person)	
	Rehab S	Solutions, LLC	
<u> </u>	(1	Firm Company)	
	1101 N. Co	ngress Ave., Suite 208	
		(12001030)	
		Beach, FL 33426	
	(City:	State and Zip Code)	
For further information	n concerning this matter, please c	eall:	
Christopher	V. Salomoni	at (561) 736-029	94
	(Name of Person)	(Area Code & Daytime	e Telephone Number)
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	REHAB SOLUTIONS, LLC			
(Present Name) (A Florida Limited Liability Company)				
FIRST:	The Articles of Organization were filed on July 9, 2004 and assigned document number L04000051121			
SECOND:	The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:			
	Article II			
The street	address of the principal office of the Limited Liability Company is: 1101 N. Congress Ave., Suite 208 Boynton Beach, FL 33426 US			
The street	address of the principal office of the Limited Liability Company is: 1101 N. Congress Ave., Suite 208 Boynton Beach, FL 33426 US			
•	Article IV			
The name	and Florida street address of the registered agent is: Christopher V. Salomoni Rehab Solutions, LLC 1101 N. Congress Ave., Suite 208 Boynton Beach, FL 33426 US			
Dated Jan	2006			
	Signature of a member or authorized representative of a member			

Christopher V. Salomoni Typed or printed name of signee

Filing Fee: \$25.00

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