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To:

Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346 SECNE JANY OF STATE TALLAHASSEE, FLORIDA

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BASIC AMENDMENT

FENIX REHABILITATION CENTER INC.

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 24, 2003

FENIX REHABILITATION CENTER INC. 16915 N.W. 51 PLACE MIAMI, FL 33055

SUBJECT: FENIX REHABILITATION CENTER INC.

REF: P00000098516

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

The current name of the entity is as referenced above. Please correct your document accordingly.

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Teresa Brown Document Specialist FAX Aud. #: E03000283494 Letter Number: 603A00052690

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION OF

Fenix	Rehabilitation Counter Inc.
	(present name)
	(Document Number of Corporation (If known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the fullowing articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (Indicate article number(s) being amended, added or deleted)

AMENDED ARTICLE (IX)-INITIAL BOARD OF DIRECTORS

JOSE A MENDEZ (PRESIDENT)

16915 NW 51 PLACE

MIAMI, FL 33055

MIAMI, FL 33055

RNES GARCIA (PRESIDENT)

16915 NW 51 PLACE

MIAMI, FL 33055

INES GARCIA(VICE-PRESIDENT) 16915 NW 51 PLACE MIAMI, FL 33055

AMENDED ARTICLE VII

REGISTERED AGENT

Having been named as registered agent and accept service of process for the above stated corporation. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. The registered Name and Address is Incs Garcia 16915 NW 51 Place Miami, Fl 33055

(SIGNATURE OF AGENT)

9/24/03.

If signing on behalf of an entity:

Ines Garcia (TYPED OR PRINTED NAME)

THIRD:	The date of each amendment's adoption: 9/24/03.
FOURTH	: Adoption of Amendment(s) (CHECK ONE)
¥	The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) 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.
Sìgnature_	Signed this 34 day of September, 2003.
	(By the Glaiman or Vice Chairman of the Board of Directors, President or other officer if adopted by the standholders)
	OR
	(By a director if adopted by the directors)

	QR
	(By an incorporator if adopted by the incorporators)
	Tose Alberto Mendez (Typed or privated name)
	President.