P01000011573

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CORPORATE FILING SERVICE 3320 SW 87TH AVENUE MIAMI, FL 33165 305-552-5973

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CORPORATION NAME(S) & DOCUMENT	NUMBER(S), (if known):
1. TOTAL QUALITY REHA	AB AGENCY, INC.
(Corporation Name)	(Document #)
2.	
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
4.	
(Corporation Name)	(Document #)
	Photocopy
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS RE	GISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 17, 2006

Lazarus Corporate Filing Service 3320 SW 87th Avenue Miami, FL 33165

SUBJECT: TOTAL QUALITY REHAB, INC.

Ref. Number: P01000011573

We have received your document for TOTAL QUALITY REHAB, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

Please have Harold Castellanos-the new registered agent sign under the registered agent acceptance at the bottom of page 2. Yvonne I. Gomez hassigned as the registered agent acceptance by mistake.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Letter Number: 006A00045599

Annette Ramsey Document Specialist RECEIVED

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DIVISION DE CRETORION

DIVISION DE CRE

ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION OF



(PRESENT NAME)

Pursuant to the provision of section 607.1006, Florida Statutes, this Florida profit corporation Adopts the following articles to its articles of incorporation:

FIRST: Amendment (s) adopted: (indicate article number(s) being amended, added or delete)

ARTICLE # VI Directors

Add:

Harold Castellanos, President, Director

16379 SW 50 Terrace Miami, FL 33185

Delete:

Yvonne I Gomez, President, Director

17710 NW 73 AVE Apt 205

Miami, FL 33015

ARTICLE # IV New Registered Agent

Add:

Harold Castellanos President, Director

16379 SW 50 Terrace Miami, FL 33185

SECOND: 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, are as follows.

THIRD:	The date of each amendment's adoption:
	H: adoption of Amendment(s) (check one)
Ø	The amendment(s) was/were approved by the shareholders. The number of vote 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 for each Voting group entitled to vote separately on each amendment(s)
	"The number of votes cast for the amendments(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 incorporator without shareholder action and shareholder action was not required.
	Signature Signature (By the Chairman or Vice Chairman of the director, President or other officer if adopted by the shareholders) OR (By a director if adopted by the directors) OR (By an incorporator if adopted by the incorporators)
st	Type or printed name Pres. / Director Title aving been named as registered agent and to accept service of process for the ated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent to act in this capacity.

Registered Agent Signature

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERD OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

REGISTERED AGENT SIGNATURE