

PD20000078813

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

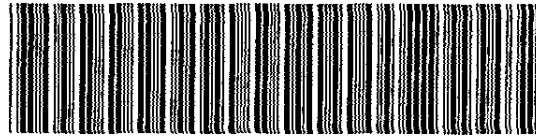
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Amend
(10), 3/16/04



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FILED
04 MAR 15 PM 1:10
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

FILED
04 MAR 15 PM 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Florida Injury and Rehabilitation Centers, Inc.

DOCUMENT NUMBER: P02000078813

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kimberly Bonaobra Russo
(Name of Person)

Florida Injury and Rehabilitation Centers, Inc.
(Name of Firm/ Company)

6220 South Orange Blossom Trail, Suite 606
(Address)

Orlando, Florida 32809
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Kimberly Bonaobra Russo (407) 856-3695
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 8, 2004

KIMBERLY RUSSO
FLORIDA INJURY & REHABILITATION CENTERS
6220 S. ORANGE BLOSSOM TRAIL - STE. 606
ORLANDO, FL 32809

SUBJECT: FLORIDA INJURY & REHABILITATION CENTERS, INC.
Ref. Number: P02000078813

We have received your document for FLORIDA INJURY & REHABILITATION CENTERS, 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):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 204A00015204

FILED
04 MAR 15 PM 1:10
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

Florida Injury and Rehabilitation Center, Inc.
(Name of corporation as currently filed with the Florida Dept. of State)

P02000078813

(Document number of corporation (if known))

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

NEW CORPORATE NAME (if changing):

N/A

(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate: Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

The articles are hereby amended to: new
owner / President, Kimberly Bonaobra Russo,
and removing Joseph Russo from said
position.

(Attach additional pages if necessary)

If an amendment provides for 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)

All shares of Joseph Russo to be
reissued to Kimberly Bonaobra Russo

(continued)

The date of each amendment(s) adoption: 3-1-04

Effective date if applicable: 3-1-04
(no more than 90 days after amendment file date)

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

- ☐ The amendment(s) was/were approved 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.

Signed this _____ day of _____.

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)

Joseph Russo

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE: \$35

*already
submitted*