| (Re | questor's Name) | | |
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| PICK-UP | ☐ WAIT | MAIL | |
| (Bu | siness Entity Nar | me) | |
| (Document Number) | | | |
| Certified Copies | _ Certificates | s of Status | |
| Special Instructions to Filing Officer: | | | |
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COVER LETTER

| TO: Amendment Section Division of Corporations | | |
|--|--|--|
| | | |
| NAME OF CORPORATION: CENTR | PAI Florida Rehab Center, IN | |
| DOCUMENT NUMBER: PO2000 / | 21558 | |
| The enclosed Articles of Amendment and fee are | submitted for filing. | |
| Please return all correspondence concerning this n | natter to the following: | |
| i i | e of Contact Person | |
| Central Flor | Firm/ Company | |
| 5385 CON | Roy Way (#104) Address | |
| Orlando, F. | L 32811 State and Zip Code | |
| | @ Yahoo. Com or future annual report notification) | |
| For further information concerning this matter, ple Peter Carlson, D.C. Name of Contact Person | ease call: at (<u>352</u>) <u>360 3601</u> Area Code & Daytime Telephone Number | |
| Enclosed is a check for the following amount mad | le payable to the Florida Department of State: | |
| ■ \$35 Filing Fee Status Status | □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| Mailing Address | Street Address | |
| Amendment Section Division of Corporations | Amendment Section Division of Corporations | |
| P.O. Box 6327 | Clifton Building | |
| Tallahassee, FL 32314 | 2661 Executive Center Circle | |

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

| Of of |
|---|
| LENZRAL FLORIDA RELIAS CENTER, ING |
| (Name of Corporation as currently filed with the Florida Dept. of State) |
| P02000 121558 |
| (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: |
| A. If amending name, enter the new name of the corporation: |
| 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. 4" |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Orlando, F1 328/1 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Ovlando, F1 3 2 811 |
| 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: Roy Peter Carlson, D.C. |
| New Registered Office Address: (Florida street address) |
| (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. Roy Peter Coulson D.C. Signature of New Registered Agent, if changing |

| The date of each amendment(s) adoption: 3/5/2010 | | | | | |
|---|--|--|--|--|--|
| The date of each amendment(s) adoption: 3/5/2010 Effective date if applicable: 3/9/2010 (no more than 90 days after amendment file date) | | | | | |
| (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 Januch Quemesy." | | | | | |
| 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 3/5/2010 | | | | | |
| 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) | | | | | |
| Roy PETER Carlson (Typed or printed name of person signing) | | | | | |
| President. (Title of person signing) | | | | | |

| rem (Atta | oved and title, name, and address of each Officer ich additional sheets, if necessary) | and/or Director being added: | |
|--------------|--|-------------------------------------|-------------------|
| Title | Name OL A | Address | Type of Action |
| <u>tr</u> | 25. Koy Teter Carlson | 531 S. Grove St Eustis, Fl 32126 | ☑ Add □ Remove |
| Ps | 25. Roy Peter Carlson A NICK Dumesu | | ☐ Add Remove |
| - | | | |
| | amending or adding additional Articles, enter cl ttach additional sheets, if necessary). (Be specific | | |
| | N/A | | |
| | | | |
| · | | | |
| | f an amendment provides for an exchange, reclas | | |
| | orovisions for implementing the amendment if no (if not applicable, indicate N/A) | t contained in the amendment it | seir: |
| | | | |
| | N/A | • | |
| | | | |
| | | | |

If amending the Officers and/or Directors, enter the title and name of each officer/director being