P03000045618

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DIVISION OF CORPORATIONS
7005 JUN -8 AM 10: 39

Amend.

1B/10

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF	CORPORATION: _	GABLES REHAB	ILITATION, INC).			
DOCUMEN	T NUMBER: P0300	0045618	- ' 	····			
The enclosed	Articles of Amendme	ent and fee are s	ubmitted for f	iling.			
Please return	all correspondence co	oncerning this m	atter to the fol	llowing:			
	LILLIAN SARDINAS		· · · · · · · · · · · · · · · · · · ·				
	(Name of Contact Person)						
LILLIAN SARDINAS ACCOUNTANT, INC.							
	(Firm! Company)						
	7171 CORAL WAY, SUITE 517						
		(Ad	dress)				
	MIAMI, FL 33155						
		(City/ State/	and Zip Code)				
For further in	nformation concerning	this matter, ple	ase call:				
LILLIAN SAR		e Times	at (<u>_305</u>) 262-7300	=		
	(Name of Contact Person)	(Ar e a C	Code & Daytime Te	elephone Number)		
Enclosed is a	check for the followi	ng amount:					
☑ \$35 Filing F	ee		S43.75 Filin Certified Co (Additional enclosed)	opy copy is	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	Mailing Address Amendment Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	tions	Ame Divis 409 I	et Address ndment Section sion of Corporal E. Gaines Street hassee, FL 323	tions		

DIVISION OF CORPORATIONS
2005 JUN -8 AM 10: 39

Articles of Amendment to Articles of Incorporation of

	GABLES REHABILITATION, INC.
* _ · _ · _	(Name of corporation as currently filed with the Florida Dept. of State)
	P03000045618
_	(Document number of corporation (if known)
	provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation wing amendment(s) to its Articles of Incorporation:
NEW CORPO	RATE NAME (if changing):
	word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") rporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
	TS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) Fitle(s) being amended, added or deleted: (BE SPECIFIC)
ARTICLE V : INC	CORPORATORS AND/OR DIRECTORS
DI	ELETE: Dinorah F. Gonzalez of 8851 N.W. 119 St., Hialeah, FI 33018 as Director
	and Secretary.
	
	(Attach additional pages if necessary)
If an amendmer for implementir	nt provides for exchange, reclassification, or cancellation of issued shares, provisioning the amendment if not contained in the amendment itself: (if not applicable, indicate N

(continued)

The date of each amendment(s) adoption: 05-09-2005						
Effective date if applicable:	05-09-2005	en e				
	(no more than 90 days after amendment fil	e date)				
Adoption of Amendment(s)	(CHECK ONE)					
The amendment(s) the amendment(s) t	was/were approved by the sharehold by the shareholders was/were sufficie	ers. The number of votes cast for nt for approval.				
The amendment(s) following statement separately on the a	was/were approved by the shareholder must be separately provided for each mendment(s):	ers through voting groups. The h voting group entitled to vote				
"The number of votes cast for the amendment(s) was/were sufficient for approval by						
	(voting group)	.				
	e amendment(s) was/were adopted by the board of directors without shareholder action dishareholder action was not required.					
	he amendment(s) was/were adopted by the incorporators without shareholder action and nareholder action was not required.					
Signed this 9TH day of	MAY2005					
select	lirector president or other officer - if directed, by an incorporator - if in the hands of a nated fiduciary by that fiduciary)	ors or officers have not been eceiver, trustee, or other court				
TAMARA REVUELTA						
(Typed or printed name of person signing)						
PRESIDENT						
	(Title of person signing)					

FILING FEE: \$35