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Account Name : ALBA ACCOUNTING SERVICE, INC.

Account Number : I20040000143 Phone : (305)824-5444

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**BASIC AMENDMENT** 

GAVY REHABILITATION CENTER, INC.

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12/9/2004



FLORIDA DEPARTMENT OF STATE

Glenda E. Hond Secretary of Stane

December 9, 2004

CAVY REHADILITATION CENTER, INC. 330 EAST 9TH STREET 206 HIBLEAH, FL 33010

SUBJECT: GAVY REHABILITATION CENTER, INC.

REF: P03000083539

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Karen Gibson Document Specialist FAX Aud. #: E04000243139 Letter Number: 504A00068956

#### ARTICLES OF AMENDMENT

TO

## ARTICLES OF INCORPORATION

**OF** 



### GAVY REHABILITATION CENTER, INC.

(present name)

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

FIRST: Amendment (6) adopted: (indicate article number(s) being amended, added, or deleted)

### ARTICLE "VII" OFFICERS.

ADD NEW VICE-PRESIDENT:

GENOVEVA SANTANA 6070 WEST 18 AVE AP 111 HIALEAH, FL 33012

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued theres, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

THIRD: The date of each amendment's adoption: December 3rd, 2004

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	(1)	was/were	sufficient	for
appro	val by					_	27		
			Vai	ing 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.

Signature

the chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholder)

OR

(By a director if adopted by the directors)

OR

(Dy an incorporator if adopted by the incorporators)

I HEREBY AM FAMILIAR WITH AND ACEPT THE DUTIES AND RESPONSIBILITIES AS VICE PRESIDENT OF THE ABOVE SAID CORPORATION AND I HEREBY COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

GENOVEVA SANTANA

DATE