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FILED

2008 AUG 15 AM 11:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend
of

8-1508

Stable Therapy, Corp
23108 East Gardens Way #214
Boca Raton, FL 33433

08/06/08

Amendment Section
Division of Corporations
Sylvia Gilbert
Regulatory Specialist II

Subject: Stable Therapy, Corp
Ref. Number: P03000125955

Dear Sylvia Gilbert,

Thanks for your prompt reply, attached please find
the application/forms required.

Regards,
Juan Rodriguez

RECEIVED
2008 AUG 15 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 15, 2008

JUAN RODRIQUEZ
STABLE THERAPY, CORP.
23108 POST GARDENS WAY UNIT 214
BOCA RATON, FL 33433

SUBJECT: STABLE THERAPY, CORP.
Ref. Number: P03000125955

We have received your document for STABLE THERAPY, CORP. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(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) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

Letter Number: 808A00041360

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Stable Therapy, Corp

DOCUMENT NUMBER: P03000125955

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

Please return all correspondence concerning this matter to the following:

Juan Rodriguez
(Name of Contact Person)

Stable Therapy, Corp
(Firm/ Company)

23108 Post Gardens Way #214
(Address)

Boca Raton FL 33433
(City/ State and Zip Code)

For further information concerning this matter, please call:

Juan Rodriguez at (954) 8713547
(Name of Contact 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Stable Therapy, Corp

(Name of corporation as currently filed with the Florida Dept. of State)

P03000125955

(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.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

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

Delete Maria C Noguera as Title P, officer/Director of Stable Therapy, Corp and replace with new Title P officer/Director Mr. Juan Rodriguez.

(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)

(continued)

The date of each amendment(s) adoption: 8/06/08

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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

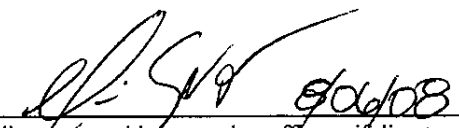
☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ 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.

Signature  8/06/08
(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)

Maria C Noguera
(Typed or printed name of person signing)

Officer / Director
(Title of person signing)

FILING FEE: \$35