

PD4000116417

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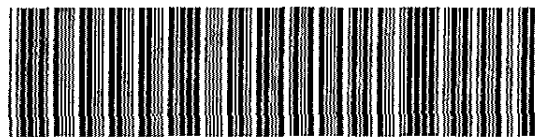
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CLERK OF STATE  
TALLAHASSEE, FLORIDA

NC  
MD 1/12

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: NCZ THERAPY AND REHABILITATION, INC.

DOCUMENT NUMBER: P04000116417

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

Please return all correspondence concerning this matter to the following:

NICANOR SALAZAR

(Name of Contact Person)

NCZ THERAPY AND REHABILITATION, INC.

(Firm/ Company)

3084 NW 7TH ST STE-A

(Address)

MIAMI, FL. 33125

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

NICANOR SALAZAR

(Name of Contact Person)

at ( 786 )

487-8238

(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

December 27, 2004

NICANOR SALAZAR  
NCZ THERAPY AND REHABILITATION INC  
3084 N.W. 7TH ST., STE.A  
MIAMI, FL 33125

SUBJECT: NCZ THERAPY AND REHABILITATION INC  
Ref. Number: P04000116417

We have received your document for NCZ THERAPY AND REHABILITATION INC and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6882.

Maryanne Dickey  
Document Specialist

Letter Number: 804A00071522

Articles of Amendment  
to  
Articles of Incorporation  
of

NCZ THERAPY AND REHABILITATION, INC.

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

P004000116417

(Document number of corporation (if known))

FILED  
05 JAN 11 PM 4:39  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

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):**

NCZ MEDICAL CENTER, INC.

(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)**

N/A

(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: 12/10/04

Effective date if applicable: 12/10/04  
(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 10TH day of DECEMBER, 2004

Signature

Nicanor Salazar  
(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)

NICANOR SALAZAR,

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

**FILING FEE: \$35**