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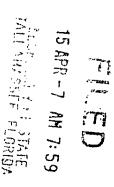
(Re	questor's Name)		
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(MM) 4-10-15

,	•	COVER LETTER		下
TO: Amendment Section Division of Corpo				Allegas
NAME OF CORPOR	RATION: Double		enter anc	TOTS
DOCUMENT NUME	BER:	00130018		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		≥,,, œ
Please return all corres	pondence concerning this mat	tter to the following:		
	Janett	lopez		
	Double 1		Center onc	
	2711 SI	V 137 ave	+98.	
	Mia		3175	***
		City/ State and Zip Code		
		NA		
	E-mail address: (to be us	ed for future annual report n	otification)	
For further information	concerning this matter, pleas	e call:		
Janett	lopez	at (30 T	, 220 - 040) [
Name o	of Contact Person	Area Cod	e & Daytime Telephone Nur	nber
Enclosed is a check for	the following amount made p	payable to the Florida Depar	tment of State:	
\$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)	
Ame Divis P.O.	ing Address Indiment Section Sion of Corporations Box 6327 hassee-FI-32314	Division Clifton E 2661 Ex	nent Section of Corporations	

Articles of Amendment to
Articles of Incorporation
of The state of th
DOUBLE R MERAPY CENTER BIL 3 -
(Name of Corporation as currently filed with the Florida Dept. of State)
(Name of Corporation as currently filed with the Florida Dept. of State) PO 4 000 13 00 18 (Document Number of Corporation (if known)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new 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.A."
B. Enter new principal office address, if applicable:
(Principal office address <u>MUST BE A STREET ADDRESS</u>)
C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
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 JUNETT COPEL
2711 sw 137 are # 98
(Florida street address)
New Registered Office Address: MI am . Florida 33175
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Jugott -
Signature of New Registered Agent, if changing
/ /

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u> <u>Joh</u>	ın Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>f</u>	MORTINEZ NERBY	2711 rw 137 ave
Add	·. ·	,	Suite 98
Remove			MIAHI R 33175
2) Change	P	Lope 2, Janett	2711 SW 137 aux
Add			MI am! R 33175
Remove 3) Change	VP	Marrinez, Peressy	2711 SW 137 ave
Add			Suite 98
Remove			MIGHI R 33175
4) Change			
Add			
Remove	-		
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)			
		. <u> </u>		
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	_	_		
				
			<u>. </u>	
			_ 	
		31 d	a:	
an amendment provides for an excha rovisions for implementing the amen-	inge, reclassification dment if not contain	. or cancellation o ed in the amendm	nt itself:	
(if not applicable, indicate N/A)				
	- · · · · · · · · · · · · · · · · · · ·			
<u> </u>				-
			<u> </u>	

The date of each amendment(s) adoption: date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date)	, if other than the
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	
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 03 17 12015 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)	_
Tonett Lopez (Typed or printed name of person signing) PHSI den T	_
(Title of person signing)	