P04000142633

(F	Requestor's Name)	
(A	(ddress)	
(A	Address)	
	City/State/Zip/Phone #)	
(C	nty/State/Elp/Filone#)	
PICK-UP	WAIT	MAIL
	Business Entity Name)	
(C	ousiness Entity Name)	
(C	Ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	o Filing Officer;	
		Ī

Office Use Only



700053635397



05/13/05--01013--007 **210.00

FILED RECEIVED

OF HAY 13 PH 20548AY 13 M 9: 47

SECRETARY OF STATES OF SECULORIDAS
TALLAHASSEE, FLORIDAN OF SECULORIDAS

5/3/05

EXPRESS CORPORATE FILING SERVICE INC. Requestor's Name 1000 PONCE DE LEON BLVD. SUITE:101 Address CORAL GABLES, FL 33134 (305) 444-4994 Phone # City/State/Zip OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Document #) (Document #) (Corporation Name) Walk in Certified Copy Pick up time Photocopy Mail out Certificate of Status Will wait AMENDMENTS NEW FILINGS Profit Amendment NonProfit Resignation of R.A., Officer/ Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement

Trademark

Examiner's Initials

Other

CR2E031(9/92)

Articles of Amendment to Articles of Incorporation of

FILED

05 MAY 13 PM 2:48

SECRETARY OF STATE

CAIBARIEN REHABILITATION CENTER CORP

P04000142633

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

(continued)

The date of each amendment(s) adoption: 05/12/2005	
Effective date if applicable: 05/12/2005	
(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.	n
☐ The amendment(s) was/were adopted by the incorporators without shareholder action an shareholder action was not required.	đ
Signed this 12 day of MAY 2005	
Signature Vose A. Rorres	
(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)	
JOSE A. TORRES	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	

FILING FEE: \$35