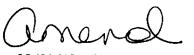
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(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	Best Florida Rehabilitation Center Inc.		
DOCUMENT NU	J MBER:	P05000155058		
The enclosed Artic	cles of Amendment and	fee are submitted for filing.		
Please return all co	orrespondence concerni	ng this matter to the following:		
		George S. Levy Name of Contact Person		
		Name of Confact Person		
	Best F	lorida Rehabilitation Center Inc.		
		Firm/ Company		
1414 NW 107 Ave Suite 203				
		Address		
Doral Fla.33172				
City/ State and Zip Code				
	Gle E-mail address: (to	evy4477 @yahoo.com be used for future annual report notification)		
For further informa	ation concerning this ma	atter, please call:		
	George S. Levy	at (305) 343-5761		
Name	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check	c for the following amo	unt made payable to the Florida Department of State:		
	\$43.75 Filing Fee & Certificate of Status	Standard Status Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Ad Amendmen Division of P.O. Box 63 Tallahassee	t Section Corporations 327	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

(Name of Corporation as currently filed with the Florida Dept. of State)	The new corporated" or the essional corporation
(Name of Corporation as currently filed with the Florida Dept. of State) SECRE P05000155058 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "in abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional must contain the word "chartered," "professional association," or the abbreviation "P.A. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	TARY OF STATE ASSEE, FLORID: ation adopts the following the new corporated or the essional corporation
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: In the must be distinguishable and contain the word "corporation," "company," or "in abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional association, " or the abbreviation "P. A. Enter new principal office address, if applicable: [Principal office address MUST BE A STREET ADDRESS]	The new corporated" or the essional corporation
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Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corpora amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "in abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional association, or the abbreviation "P. ame must contain the word "chartered," "professional association," or the abbreviation "P. amendment of the corporation of the abbreviation "P. amendment of the corporation of the co	The new corporated" or the essional corporation
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Principal office address <u>MUST BE A STREET ADDRESS</u>)	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	203
<u>Doral Fla.33172</u>	
	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 1414 NW 107 Ave Suite 2 Doral Fla.33172	
D. If amending the registered agent and/or registered office address in Florida, enter the new registered agent and/or the new registered office address: Name of New Registered Agent:	name of the
New Registered Office Address: (Florida street address)	
, Flori	ida
(City) (Zip Code)	
ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligat	ions of the position.
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)

Title .	<u>Name</u>	Address	Type of Action
			
			Remove
			· · · · · · · · · · · · · · · · · · ·

	or adding additional Articles, entional sheets, if necessary). (Be specified)		
		<u> </u>	
_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	lment provides for an exchange, r		
	for implementing the amendment pplicable, indicate N/A)	if not contained in the amend	<u>ment itself:</u>
			· · · · · · · · · · · · · · · · · · ·
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The date of each amendmen	t(s) adoption: August 3, 2010
	(date of adoption is required)
Effective date <u>if applicable</u> :	
. •	(no more than 90 days after amendment file date)
• •	
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
Signature(By	a director, president or other officer – if directors or officers have not been
	cted, by an incorporator – if in the hands of a receiver, trustee, or other court
арр	ointed fiduciary by that fiduciary)
	George S. Levy
	(Typed or printed name of person signing)
	President President
	(Title of person signing)