

P06000046528

Florida Department of State
Division of Corporations
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COR AMND/RESTATE/CORRECT OR O/D RESIGN

1 STEP MEDICAL & REHABILITATION CENTER, INC.

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: 1 STEP MEDICAL & REHABILITATION CENTER, INC.

DOCUMENT NUMBER: P06000046528

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

Please return all correspondence concerning this matter to the following:

ILIANA TORRES

(Name of Contact Person)

1 STEP MEDICAL & REHABILITATION CENTER, INC.

(Firm/ Company)

4343 WEST FLAGLER ST # 404

(Address)

MIAMI, FL 33134

(City/ State and Zip Code)

For further information concerning this matter, please call:

ILIANA TORRES

(Name of Contact Person)

at (786) 237-9929

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

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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**

1 STEP MEDICAL & REHABILITATION CENTER, INC.

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

P06000046528

(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):

(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: REGISTERED AGENT ILIANA TORRES 4343 WEST FLAGLER ST 404 HIALEAH FL 33010

DELETE: PRESIDENT DIANELYS MAURELLES 4343 WEST FLAGLER ST 404 MIAMI FL 33134

DELETE: MAILING & PRINCIPAL ADDRESS 4343 WEST FLAGLER ST 404 MIAMI FL 33134

ADD: REGISTERED AGENT FRANCOES SAAVEDRA SMITH 798 ILEANE ROAD W WEST PALM BEACH FL 33416

ADD: PRESIDENT FRANCOES SAAVEDRA SMITH 798 ILEANE ROAD W WEST PALM BEACH FL 33415

ADD: PRINCIPAL & MAILING ADDRESS 798 ILEANE ROAD W WEST PALM BEACH FL 33415

(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)

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The date of each amendment(s) adoption: 07/03/08

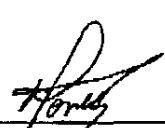
Effective date if applicable: 07/03/08
(no more than 90 days after amendment file date)

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 

(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)

ILIANA TORRES

(Typed or printed name of person signing)

Registered Agent

(Title of person signing)

FILING FEE: \$35