

PO60000131873

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

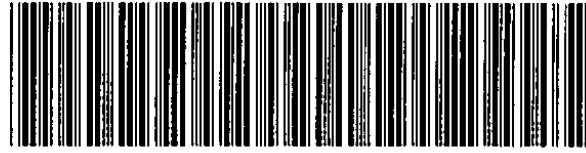
(Business Entity Name)

(Document Number)

1 Copies _____ Certificates of Status _____

al Instructions to Filing Officer:

Office Use Only



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12/10/08--01013--010 **35.00

FILED
2008 DEC 23 AM 9:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AJR
12/24/08

X00789, 00709, 06422, 00671

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: United Rehab Center Inc.
(Name of Corporation)

DOCUMENT NUMBER: P06000131873

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Pedro Machin Sr.
(Name of Contact Person)

United Rehab Center Inc.
(Firm/Company)

5721 SW 165 Ct.
(Address)

Miami, Florida, 33193
(City/State and Zip Code)

For further information concerning this matter, please call:

Pedro Machin Sr. at (786) 306-3519
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 15, 2008

Pedro Machin Sr.
United Rehab Center Inc.
5721 SW 165 Ct.
Miami, FL 33193

SUBJECT: UNITED REHAB CENTER, INC.
Ref. Number: P06000131873

We have received your document for UNITED REHAB CENTER, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

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) 245-6907.

Annette Ramsey
Regulatory Specialist II

Letter Number: 908A00060376

RECEIVED
2008 DEC 23 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

FILED

2008 DEC 23 AM 9:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

United Rehab center, Inc.

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

P06000131873

(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:

A. If amending name, enter the new name of the corporation:

(SAME)

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 MUST BE A STREET ADDRESS)

(SAME)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

(SAME)

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:

Pedro MACHIN Sr.

New Registered Office Address:

5721 S.W. 165 CT

(Florida street address)

Miami

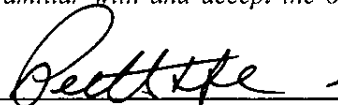
(City)

Florida 33193

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
President	Imara Paramo	5721 S.W. 165CT MIAMI, FL 33193	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
	PEDRO MACHIN SR. (CHANGE TO President)	5721 S.W. 165CT MIAMI, FL 33193	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

N/A.

Just to Remove Imara Paramo listed Above
 & change to President Pedro Machin Sr.

F. If an amendment provides for an 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)

N/A

The date of each amendment(s) adoption: _____

Effective date if applicable: 12/18/08
(no more than 90 days after amendment file date)

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):

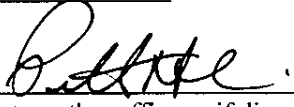
"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(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.

Dated 12/18/08

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)

Pedro Machin Sr.
(Typed or printed name of person signing)

President
(Title of person signing)