P07000005972

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Danuary Mary Ing.)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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03/06/08--01045--021 **43.75

SECRETARY OF STATE TALLAHASSEE, FLORID

Amend

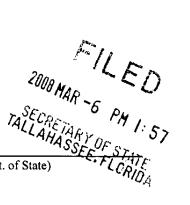
3-10-08

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION: PLANT CITY	Y REHAB & WELLNESS CE	NTER,INC.
DOCUMENT N	UMBER: P07000005972		
The enclosed Arti	cles of Amendment and fee a	re submitted for filing.	
Please return all c	orrespondence concerning thi	is matter to the following:	
		• • •	
TO	NY HALL		
	(Name	of Contact Person)	
PL	ANT CITY REHAB & WE	ELLNESS CENTER,INC.	
* - **		rm/ Company) من المراجعة المر	
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Amendaric	int 9: offer	(Address); at the set planter.	
	1.62	The second of th	
PLA	ANT CITY, FLORIDA 33563		
	(City/ S	tate and Zip Code)	
For further inform	nation concerning this matter,	please call:	
TONY HALL		at (813) 759-01	06
(Nan	ne of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a chec	ck for the following amount:		
□\$35 Filing Fee	₹3.75 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)
Mailing A	<u>.ddress</u>	Street Address	
Amendment Section		(with Amendment Section	
Division o	f Corporations to the corporations	Division of Corporations	
P.O. Box (5327	Clifton Building 2661 Executive Center C	
Tallahassee, FL 32314		Tallahassee, FL 32301	пос

Articles of Amendment to Articles of Incorporation of



PLANT CITY REHAB & WELLNESS CENTER, INC.

P07000005972

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

(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:
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)
TONY HALL: PRESIDENT/TREASURER/DIRECTOR
MONINA V. HALL: VICE PRESIDENT/SECRETARY/DIRECTOR
6612 ThonotoSASSA Rd
6612 ThonotosassA Rd PLANT City FL 33565
. (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)

The date of each amendment	s) adoption: OCTOBER 26,2007
{ Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
* *	was/were approved by the shareholders. The number of votes cast for y the shareholders was/were sufficient for approval.
	was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote mendment(s):
"The number of	votes cast for the amendment(s) was/were sufficient for approval by
	(voting group)
	was/were adopted by the board of directors without shareholder action on was not required.
The amendment(s) v shareholder action w	was/were adopted by the incorporators without shareholder action and was not required.
selecte	irector, president or other officer - if directors or officers have not been ed, by an incorporator - if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
TON	IY HALL
- 	(Typed or printed name of person signing)
PRE	SIDENT
	(Title of person signing)

FILING FEE: \$35