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SECRETARY OF STATE
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PSP 109

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: <u>ADVANTAGE PHYSICAL THERAPY, INC.</u>				
DOCUMENT NUMBER: P07000044638				
The enclosed Articles of Amendment and fee are	e submitted for filing.			
Please return all correspondence concerning this	matter to the following:			
	OIRAC-GONZALEZ Contact Person)			
	YSICAL THERAPY, INC. / Company)	. <u>.</u>		
	STH ST, C43 UNIT 18 Address)			
(City/ Sta	I, FLA. 33175 te and Zip Code)			
For further information concerning this matter, p	olease call:			
GUSTAVO TOIRAC-GONZALEZ (Name of Contact Person)	at (<u>305</u>) <u>207-588</u> (Area Code & Daytime			
Enclosed is a check for the following amount ma	ade payable to the Florida Depa	artment of State:		
☑\$35 Filing Fee ☐\$43.75 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 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 Cir	cle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

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	ot		CEAS	
ADVANTAGE	E PHYSICAL THE	RAPY INC	SECRETA; : TALLAHAS	RYUTSTATE
(Name of Corporation as o	currently filed with t	he Florida E	Dept. of State)	SEE- LORIDA
P07000044638				
	Number of Corporati	on (if known)	
ursuant to the provisions of section 607 ollowing amendment(s) to its Articles of I		es, this <i>Flor</i>	ida Profit Coi	<i>poration</i> adopts th
. If amending name, enter the new name	ne of the corporation	<u>a:</u>		
he new name must be distinguishable incorporated" or the abbreviation "Cor". Co". A professional corporation sociation," or the abbreviation "P.A."	p., " "Inc.," or Co.,	," or the des	ignation "Cor	p," "Inc," or
Enter new principal office address, if Principal office address <u>MUST BE A ST</u>				
Enter new mailing address, if application (Mailing address MAY BE A POST O				
o. If amending the registered agent and new registered agent and/or the new			lorida, enter t	he name of the
Name of New Registered Agent:	GUSTAVO T	OIRAC-GC	NZALEZ	
New Registered Office Address:	11865 SW 26 (Florid	6TH ST, C4 da street add		
	MIAMI		, 1	lorida 33165
		(City)		Florida <u>33165</u> (Zip Code)
ew Registered Agent's Signature, if cha hereby accept the appointment as regis osition.		familiar with	and accept th	ne obligations of th
	Signature of New	Registered A	gent, if changi	ng

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>	Address	Type of Action
<u>PRES</u>	Alfred C. Cabrera	3594 SW 143RD COURT MIAMI, FLA 33175	Add Remove
PRES	Gustavo Toirac-Gonzalez	11865 SW 26TH ST C43 UNIT 18 MIAMI, FLA. 33175	☐ Add ☐ Remove
 			Add Remove
	ling or adding additional Articles, ent dditional sheets, if necessary). (Be spe		
provisio	nendment provides for an exchange, rons for implementing the amendment of applicable, indicate N/A)		
ALFRED	C. CABRERA HAS TRANSFERR	ED ALL OF HIS 100 SHARES,	
REPRESE	ENTING ALL OF THE ISSUED AI	ND OUTSTANDING SHARES,	ТО
GUSTAVO	O TOIRAC-GONZALEZ.		
	, 		
			

Th	e date of each amendment(s) adoption: JANUARY 14, 2009
Efi	fective date if applicable: JANUARY 14, 2009
	(no more than 90 days after amendment file date)
Ad	option 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"
	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_JANUARY 14, 2009
	Signature Tlawae Il
	(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)
	GUSTAVO TOIRAC-GONZALEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)