P08000042350

, (Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
	•	

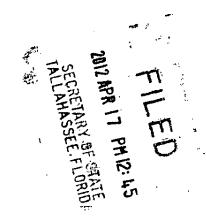
Office Use Only



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04/17/12--01020--007 **35.00



19/12 4/19/12

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPOR.	ATION: First Cho	ice Therapy Cer	nter, Inc., a Flor	ida Corporation
	ER: P080000423			-
•	f Amendment and fee are su			•
•	ondence concerning this ma	_		
			·	
_	Kevi	n R. Lottes, Es Name of Contact Perso		-
	Quarles & Bra	dv. I.I.P		
_	 	Firm/ Company		-
_	1395 Panther	Lane, Ste. 300)	_
		Address		
_	Naples, Florie			-
		City/ State and Zip Cod	e	
k	evin.lottes@qua			
	E-mail address: (to be us	sed for future annual report	notification)	•
For further information	concerning this matter, pleas	se call:		
Kevin R.	Inttes	239	659-50/9	
	Contact Person	at (23) Area Co		 er
Enclosed is a check for	the following amount made			
■ \$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)	
Amen Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 nassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

Articles of Amendment :



Articles of Incorporation

2012 APR 17 PM 12: 45

FIRST CHOICE THERAPY CI		OF STATE
	ly filed with the Florida Dept. of State AHASSI	EE.FLORID/
P08000042350		
. (Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this Florida Profit Corporation ado	pts the following amendment(s) t
A. If amending name, enter the new name of the	e corporation:	
		The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or B. Enter new principal office address, if application	orp," "Inc," or "Co". A professional corporati the abbreviation "P.A." able:	on name must contain the
(Principal office address <u>MUST BE A STREET A</u>	(DDRESS)	
		
		•
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)	
D. If amending the registered agent and/or regi- new registered agent and/or the new register		or the
Name of New Registered Agent		
		•
	(Florida street address)	
New Registered Office Address:	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen	Registered Agent: of I am familiar with and accept the obligations i	of the position.
. The boy weekly the appointment as registered agen	ajaninia a.a. = = = = = = = = = = = = =	A &

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:			
X_Change	PT	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
	1		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>то :</u> .	GIO IUCULANO	5644 TAVILLA CIRCLE, STE. 104 NAPLES, FL 34110
2) Change Add Remove		-	
3) Change Add Remove	;		
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

<mark>l amending or adding a</mark> attach additional sheets,	if necessary).	(Be specific)	-141			
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	t					
an amendment provide	esifor an exchan	ge, reclassific	ation, or cance	llation of issue	d shares.	
rovisions for implemen	ting the amend	ment if not co	ntained in the	amendment its	elf:	
(if not applicable, inc	licate N/A)					
		·				
······································	F					
						
	· · · · · · · · · · · · · · · · · · ·					
						·

The date of each amendmen	t(s) adoption: 12/31/2011
Effective date if applicable:	12/31/2011
Enterior date <u>Il applicable</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s 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
Dated 2/6	y a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
1	NANCI IUCULANO
•	(Typed or printed name of person signing)
	PRESIDENT/DIRECTOR
	(Title of person signing)