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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	AESTHETIC & REHABILITATION CENTER, INC.		
DOCUMENT NUMBER:	P0900006387		
The enclosed Articles of Amenda	ent and fee are submitted for filing.		
Please return all correspondence	oncerning this matter to the following:		
	ROY PETER CARLSON, DC		
	Name of Contact Person		
AES	THETIC & REHABILITATION CENTER, INC.		
	Firm/ Company		
	2713 W. SAINT ISABEL ST		
	Address		
	TAMPA, FL 33607		
	City/ State and Zip Code		
Al E-mail ad	STHETICANDREHAB@LIVE.COM ress: (to be used for future annual report notification)		
For further information concernin	g this matter, please call:		
ROY PETER CARLS			
Name of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the follow	ng amount made payable to the Florida Department of State:		
\$35 Filing Fee \$43.75 Fili Certificate	rig Fee & S43.75 Filing Fee & S52.50 Filing Fee of Status Certified Copy Certificate of Status (Additional copy is enclosed) 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 Circle Tallahassee, FL 32301		

Articles of Amendment to **Articles of Incorporation**

AESTHETIC & REHABILITATION CENTER, INC.

•	Articles of Incorporatio	n	
	of		
AESTHETIC & RE	HABILITATION CENT	ER, INC.	The second
(Name of Corporation as cu	rrently filed with the Florid	a Dept. of State)	
Р	09000006387		THE REPORT OF THE PARTY OF THE
(Document N	Number of Corporation (if known	wn)	
Pursuant to the provisions of section 607.1 amendment(s) to its Articles of Incorporation		'orida Profit Corporatio	n adopts the following
A. If amending name, enter the new nam	e of the corporation:		
			The new
name must be distinguishable and contal abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," " B. Enter new principal office address, if a (Principal office address MUST BE A STR) C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF	the designation "Corp," "Inc, professional association," or applicable: EET ADDRESS) ble:	," or "Co". A professi	onal corporation
D. If amending the registered agent and/onew registered agent and/or the new received agent and agent		ı Florida, enter the nam	ne of the
Name of New Registered Agent:	ROY PETER CARLSO	ON D.C.	
New Registered Office Address:	2713 W. SAINT ISABI (Florida street a		
	TAMPA	, Florida_	33607
	(City)	(Zip Code)	·
New Registered Agent's Signature if char	aging Dogistored Agents		

ered 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>	Address	Type of Action
PD	WILLIAM N. RIVERA	2713 W. SAINT ISABEL ST TAMPA. FL 33607	_ □ Add _ ☑ Remove
PD	ROY PETER CARLSON	2713 W. SAINT ISABEL ST	_ ☑ Add _ □ Remove
(attach a	dditional sheets, if necessary). (Be spe	ecific)	
	nendment provides for an exchange, r		
	ons for implementing the amendment of applicable, indicate N/A)	if not contained in the amendmen	t itself:

The date of each amendmen	t(s) adoption: OCTOBER 18, 2011
Effective,date <u>if applicable</u> :	OCTOBER 18, 2011 OCTOBER 18, 2011
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):
	cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated OC1	OBER 18, 2011
Signature(By	a director, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	ROY PETER CARLSON
	(Typed or printed name of person signing)
	Kresident
	(Title of person signing)