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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL .
(Bu	usiness Entity Name	e)
(Document Number)		
Certified Copies	Certificates o	of Status
Special Instructions to Filing Officer:		





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08/21/12 - 01014--013 **85.00

Amend



SEP 2 1 2012 T. ROBERTS

COVER LETTER

Division of Corporations
NAME OF CORPORATION: 6+6 Medical Center and Rehabilitation Corp
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Judith Calderon
Judith (alderson Name of Contact Person G+G Medical Centur and Juhabili Hatton Corp
2140 W flagler at 20
Miami R 33135
City/State and Zip Code
$\mathcal{M}\mathcal{A}$
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Luath Calderon at 305, 982 8577
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) \$35 Filing Fee Certified Copy Certificate of Status (Additional Copy (A

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Street Address
Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

is enclosed)

Articles of Amendment

to Articles of Incorporation

6+6 Medical Contr	and behabilitation loss
(Name of Corporation as currently filed with the Flo	
1090000760	<i>10</i>
(Document Number of Corporation (if)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable;	320
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	The second secon
C. Enter new mailing address, if applicable:	Di Co
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office addressive new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent Jual L	lduon
2440 W F	lagler or +210
Minui	2017
New Registered Office Address: (City)	Florida 357-35
,	(ap eviley
New Registered Agent's Signature of changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
Signal the of New Registered Ag	ent, 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 <math>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	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	PD Basch, Alberto &	2140 WEST Flagler et
Add		MiAMI, R 33135
2) Change	l Calderon, Judith	2140 west flagler or Suite 210
Remove		Miami, R 33135
3) Change	· · · · · · · · · · · · · · · · · · ·	<u> </u>
Add	•	
Remove		
4) Change		· -
Add		
Remove		
5) Change		
Add		
Remove		
6) Change	<u> </u>	
Add		
Remove		

	eets, if necessary).	cles, enter change(s) t (Be specific)		
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	rovides for an exch	ange, reclassification	or cancellation of is	sued shares,
f an amendment r	lementing the ame	ndment if not contain	ed in the amendmen	itself:
If an amendment provisions for im			•	
provisions for imp	ole, indicate N/A)			
If an amendment p provisions for imp (if not applica	ble, indicate N/A)			
provisions for imp	ble, indicate N/A)			
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provisions for imp	ble, indicate N/A)			

The date of each amendment(s) adoption:	09 00	2010		
Effective date if applicable:	09 00	2012		
	(no more than 90 d	dys after amendment file date)		
Adoption of Amendment(s) (CHI	ECK ONE)			
The amendment(s) was/were adopted by the s by the shareholders was/were sufficient for ap	hareholders. The nu oproval.	umber of votes cast for the amendment(s)		
☐ The amendment(s) was/were approved by the must be separately provided for each voting g				
"The number of votes cast for the amend	lment(s) was/were s	ufficient for approval		
by(voti	ng group)	, , , , , , , , , , , , , , , , , , , ,		
☐ The amendment(s) was/were adopted by the b action was not required.	oard of directors wi	thout shareholder action and shareholder		
☐ The amendment(s) was/were adopted by the in action was not required.	ncorporators withou	t shareholder action and shareholder		
Dated	1/2012			
Signature				
	porator – if in the h	if directors or officers have not been ands of a receiver, trustee, or other court		
	A 13	Calderon		
. (7	Typed or printed nam	ne of person signing)		
president				
(Title of person signing)				