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SECRETARY OF STATE TALLAHASSEE, FLORIDA

AN Correction
12/2/09

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: G L REHABILITATIO	N CENTER INC
DOCUMENT NUMBER: P0900009	·
The enclosed Articles of Correction and	fee are submitted for filing.
Please return all correspondence concern	ning this matter to the following:
GUILLERMO RODRIGUEZ Name of Contact Person	
G L REHABILITATION CENTER INC	
4100 SW 103 CT	
MIAMI, FL 33165 City/State and Zip Code	
E-mail address: (to be used for future annua	l report notification)
For further information concerning this	matter, please call:
GUILLERMO RODRIGUEZ	at (786) 274-3455 Area Code & Daytime Telephone Number
Name of Contact Person	
Enclosed is a check for the following an	
✓ \$35.00 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status
\$43.75 Filing Fee & Certified Copy	\$52.50 Filing Fee, Certificate of Status & Certified Copy
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 CORRECTION

for

G L REHABILITATION CENTER INC		
Name of Corporation as currently filed with the Florida Dept. of State		
P09000092248		
Document Number (if known)		
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation these Articles of Correction within 30 days of the file date of the document being corrected.	files	
These articles of correction correct ARTICLES OF INCORPORATION (Document Type Being Corrected)		
filed with the Department of State on NOVEMBER 09, 2009 (File Date of Document)		
Specify the inaccuracy, incorrect statement, or defect:		
THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS:		
4100 SW 103 CT		
MIAMI, FL 33165		
	99	380
	9 NOV 30 PH	密
Correct the inaccuracy, incorrect statement, or defect:	3	DSS DX
7221 CORAL WAY SUITE 207	20	ių č
MIAMI, FL 33155		FLO
WILLIAM, 1 E 33 133		LORIB
		79
\nearrow		
(Signature of a director, president or other officer - if directors or officers have		
other court appointed fiduciary, by that fiduciary.)		
X May 1		
(Typet of riped name of person signing) GUILLERMO RODRI (Title of person signing) (Title of person signing)		
Filing Fee: \$35.00		

Filing Fee: \$35.00