

P10000004727

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

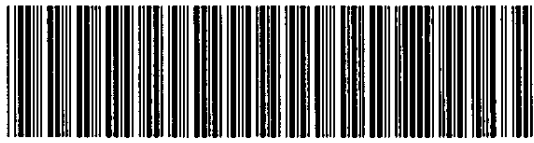
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



000180898540

AC 5/19/10
E. DENNARD

5/18/10

CORPORATE DETAIL RECORD SCREEN

4:07 PM

NUM: P10000004727 ST:FL ACTIVE/FL PROFIT FLD: 01/15/2010

NAME : MIAMI LAKES THERAPY CENTER, INC.

PRINCIPAL: 6073 NW 167TH STREET

ADDRESS SUITE C13
MIAMI LAKES, FL 33015

RA NAME : PELAEZ, PATRICIA

RA ADDR : 6073 NW 167TH STREET
SUITE C13

MIAMI LAKES, FL 33015

ANN REP : * NONE FILED *

1. MENU, 3. OFFICERS, 7. LIST, 8. NEXT, 9. PREV

ENTER SELECTION AND CR:

5/18/10

OFFICER/DIRECTOR DETAIL SCREEN

4:07 PM

CORP NUMBER: P10000004727 CORP NAME: MIAMI LAKES THERAPY CENTER, INC.

TITLE: PD NAME: PELAEZ, PATRICIA

6073 NW 167TH STREET
MIAMI LAKES, FL 33015

+ NEXT, - PREV, 1. MENU, 2. FILING, 3. TOP
7. LIST, 8. NEXT BY LIST, 9. PREV BY LIST

ENTER SELECTION AND CR:



May 13, 2010

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Miami Lakes Therapy Center, Inc.
Patricia Robaina Loureiro
6073 NW 167th St, Suite C13
Miami Lakes, FL 33015

Re: Florida Document No: P10000004727

To Whom It May Concern:

This writing is to request that my corporation documents be updated to reflect my legal name change. Enclosed you will find the following:

- ✓ Court ordered legal name change
- ✓ Copy of Tax ID number
- ✓ Copy of S Corp Filing
- ✓ Copy of Article of Incorporation
- ✓ Copy of US Passport
- ✓ Copy of Social Security
- ✓ Copy of Florida Driver's License

Please feel free to contact me without hesitation should you require any additional information regarding this request or if you should require additional documentation. Thank you in advance for your prompt attention and consideration.

cc: Jeffrey Cohen, Esquire
George Brito, CPA
Corp File

RECEIVED
2010 MAY 18 AM 9:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Miami Lakes Therapy Center, Inc. 6073 NW 167th St. C13 Miami Lakes, Florida 33015
Tel: 305.362.5328 Fax: 305.362.3303 eFax: 305.424.7729
www.miamilakestherapy.com

IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT
IN AND FOR MIAMI DADE COUNTY, FLORIDA

Case No.: 2009-025897-FC-04

Division: FC - 38

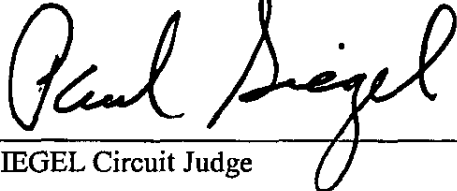
IN RE: THE NAME CHANGE OF
PATRICIA PELAEZ,
Petitioner

FINAL JUDGMENT OF CHANGE OF NAME (ADULT)

This cause came before the Court on October 21, 2009, for a hearing on the Petition for Change of Name (Adult) under section 68.07, Florida Statutes, and it appearing to the Court that:


1. Petitioner is a bona fide resident of MIAMI DADE County, Florida;
2. Petitioner's request is not for any ulterior or illegal purpose; and
3. Granting this petition will not in any manner invade the property rights of others, whether partnership, patent, goodwill, privacy, trademark, or otherwise; it is

ORDERED that Petitioner's present name PATRICIA PELAEZ is changed to PATRICIA ROBAINA-LOUREIRO, by which Petitioner shall hereafter be known.

ORDERED ON OCT 21 2009

PAUL SIEGEL Circuit Judge

COPIES TO:
PIERCE E. RIVERA, ESQ.
782 NW Le Jeune Road, Suite #529
Miami, Florida 33126

PAUL SIEGEL
CIRCUIT JUDGE

STATE OF FLORIDA, COUNTY OF DADE
I HEREBY CERTIFY that the foregoing is a true and correct copy of the original on file in this office. 10/21/09 AD 20
HARVEY RUVIN, Clerk of Circuit and County Courts
Deputy Clerk 
Tonia Harris

