Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305) 634-3694

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Enter the email address for this business entity to be used for fut-annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN PROGRESSIVE REHAB TREATMENTS CORP

PAGE 01/04

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Corporate Filing Menu

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EMPIRE CORP KIT

Articles of Amendment

Amo	ies of Incor of	rpegation		•
PROGRESSIVE		AB TREA	tments	CORP
(Name of Corporation as currently	filed with th	e Florida Dept. o	f State)	
P100000				
(Document Number of				
Pursuant to the provisions of section 607.1006, Flamendment(s) to its Articles of Incorporation:	orida Statute	s, this <i>Florida Pr</i>	ofit Corporation ad	opts the following
A. If amending name, enter the new name of the	corporation	į		
				The new
name must be distinguishable and contain the vabbreviation "Corp.," "Inc.," or Co., " or the desiname must contain the word "chartered," "profession. B. Enternew principal office address, if applications.	gnation "Co onal associat	rp," "Inc," or "C	o". A professional eviation "P.A."	ted" or the corporation
CPrincipal office address MUST BE A STREET ADDRESS			57 AVE STE 202	AUG - S CRETAR LAHASS
		LAKE WORTH	I FL 33463	AY SEE, F
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B			FLOAN	
	•			
D. If amending the registered agent and/or registered agent and/or the new registered			a, enter the name o	<u>fthe</u>
Name of New Registered Agent: NC	Name of New Registered Agent: NOELIA MARICHAL			
400	DO SOUTH	57 AVE STE 2	02	
New Registered Office Address:	(Florid	da street address)		
LAKE WORT		H FC	, Florida 334	1 <u>63</u>
	(City)	•	(Zip Code)	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent			ot the obligations of	ihe position.

Page 1 of 3

New Registered Agent, if changing

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PAGE 02/04

EWBIKE COBB KII

<u>P</u>	WILLIAM BROGNA	4000 SOUTH 57 AVE LAKE WORTH FL 33463	D Add
_			
-			
P NOELIA MARICHAL	NOELIA MARICHAL	4000 SOUTH 57 AVE	Ø Add □ Remove
•		LAKE WORTH FI 39483	— C Kemove
		1-	□ Add
If amend	ing or adding additional Articles, e	enter change(s) here:	
(attach ad	ditional sheets, if necessary). (Be s	rpecific)	
		,	
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			,
P			;;;
		*	
		•	
<u>If an am</u>	<u>lendment provides for an exchange</u> us for implementing the amendme	e, reclassification, or cancellation of nt if not contained in the amendmen	Issued shares.
(if no	ot applicable, indicate N/A)	HE THE WINDSHIP OF THE WHITEHOUSE	<u> 10 1696111</u>
			•
		T	
.,			

Page 2 of 3

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The date of each amendment	(8) #doption:
Effective date if applicable:	(date of adoption is required)
THE THE THE PROPERTY.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
ъу	(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.	ere adopted by the incorporators without shareholder action and shareholder
Dated	08-09-10
Signature_	Juts.
seli	v a director, president op other officer - if directors or officers have not been ected, by an incorporator - if in the hands of a receiver, trustee, or other court mainted fiduciary by that fiduciary)
	Tractica Mariella (Typed or printed name of person signing)
	Ptt
	(Title of person signing)

Page 3 of 3

H10000179172