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Division of Corporations

MARTIN ACCOUNTING

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : MARTIN ACCOUNTING & TAX SERVICE, INC
Account Number : I20060000012
Phone : (305) 826-5886
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COR AMND/RESTATE/CORRECT OR O/D RESIGN
JC PHYSICAL THERAPY, INC

Certificate of Status	0
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Page Count	01
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Amend
@ 2/3/11

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February 1, 2011

FLORIDA DEPARTMENT OF STATE
Division of CorporationsJC PHYSICAL THERAPY, INC
3900 NW 79 AVE
807
DORAL, FL 33166SUBJECT: JC PHYSICAL THERAPY, INC
REF: P10000079243

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist IIFAX Aud. #: H11000025974
Letter Number: 211A00002638

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DIVISION OF CORPORATIONS
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Articles of Amendment
to
Articles of Incorporation
of

JC PHYSICAL THERAPY, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P10000079243

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

RAVON MICHELL

7585 SW 152 AVE

New Registered Office Address:

(Florida street address)

MIAMI

(City)

, Florida 33193

(Zip Code)

New Registered 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]

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>	<u>Address</u>	<u>Type of Action</u>
PDT	RODRIGUEZ TANIA	12800 SW 188 STREET MIAMI FL 33177	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
PDT	RAVON MICHELL	7585 SW 152 AVE MIAMI FL 33193	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 01/29/2011

(date of adoption is required)

Effective date if applicable: 01/29/2011

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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

by _____"

(voting group)

- ☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 01/29/2011

Signature _____

(By a director, president or other officer — if directors or officers have not been selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

TANIA RODRIGUEZ

(Typed or printed name of person signing)

PDT

(Title of person signing)