Division o	Florida Department of State Division of Corporations Electronic Filing Cover Sheet
	Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.
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t	HI 2000DB14853ABC\$ Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
	To: Division of Corporations Fax Number : (850)617-6380
*	From: Account Name : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0839 Fax Number : (305)592-9591 Enter the email address for this business entity to be used for future
ENED AM 8:07	Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** That Address: COR AMND/RESTATE/CORRECT OR O/D RESIGN JC PHYSICAL THERAPY, INC
고도~E	Certificate of Status 0 Certified Copy 0 Page Count 04 Estimated Charge \$35.00
I	Electronic Filing Menu Corporate Filing Menu Help

ę .	•	TOR
	Articles of Amendment	
	to	
	Articles of Incorporation	
		ST.
	JC PHYSICAL THERAPY, INC	
(Name of C	progration as currently filed with the Florida Dept. of State)	E. F. F. L
	P10000079243	
	F 1000007 9243	500 9
	(Document Number of Corporation (if known) f section 607.1006, Florida Statutes, this Florida Profit Corporation adopt.	the following amendment(s) to
s Articles of Incorporation	(Document Number of Corporation (if known) f section 607.1006, Florida Statutes, this Florida Profit Corporation adopt.	the following amendment(s) to
ts Articles of Incorporation	(Document Number of Corporation (if known) If section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopt the new name of the corporation:	The new
ts Articles of Incorporation A. <u>If amending name, each</u> name must be distinguish "Gorp.," "Inc.," or Co.," vord "chartered," "profess	(Document Number of Corporation (if known) If section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopt	The new abdreviation

(Moiling address <u>MAX BE A POST OFFICE BOX</u>)

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

Name of New Registered Agent	MICHELL PAVONI		
	3900 NW 79TH AVE	# 807	
	(Florida street address)		
Neve Registered Office Address:	DORAL	Florida 33166	
	(Ciry)	(Zip Code)	

<u>New Registered Agent's Signature. If changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

50 X Signature of New Registered Agent, if changing

Page 1 of 4

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 shorts, if necessary)

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Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Socretary; 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 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	et	John Doe	
X Remove	У	Mike Jones	
<u>_X</u> Add	<u>sv</u>	<u>Sally Smith</u>	
Type of Action (Check One)	Title	Nome	Address
1) Change Add Remove	VPD	ALEXANDER MARTIN	2000 6W 79TH AVE # 807 DORAL, FL." 33196
2) Change Add Remove	<u></u>		
3) Change Add Remove	<u> </u>		
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			······

E. <u>If amending or adding additional Articles, enter change(s) here;</u> (attach additional sheets, if necessary). (Be specific) . · • 3 # L . -Sec. Sec. . 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)

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______3/21/2012

The date of each amendmen	t(s) adoption: 3/27/201	2
Effective date if applicable:	3/21/2012	
<u></u>	(no more t)	han 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. ore sufficient for approval.	The number of votes cast for the amendment(s)
		s through voting groups. The following statement at to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) wa	s/were sufficient for approval
by	(voling group)	
,	(voting group)	
The amendment(5) was/we action was not required.	re adopted by the board of dire	ctors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators	without shareholder action and shareholder
Dated 3/2	1/2012	
Signature	+mora-	- Les Andre
(E 34	ly a director president or other	officer - if directors or officers have not been in the hands of a receiver, trustee, or other court iary)

MICHELL PAVONI

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I.

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(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

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