P1000039438

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: ROSS REF	IABILITATION S	ERVICES CORP
DOCUMENT NUMBE	_{ER:} P1100003963	8	
	f Amendment and fee are su		
•		_	
Please return all corresp	ondence concerning this ma	tter to the following:	
	JI	JAN CARLOS F	ROSS
		Name of Contact Person	
	ROSS RE	HABILITATION	SERVICES CORP
		Firm/ Company	
_	47	71 SW 8TH STI	REET
		Address	
		MIAMI, FL 3314	
		City/ State and Zip Code	2
	E-mail address: (to be us	sed for future annual report	notification)
	• •		
For further information	concerning this matter, pleas	se call:	
JUAN CARLO	S ROSS	at (305	, 646-1886
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ng Address		Address
	dment Section on of Corporations	Amendment Section Division of Corporations	
	Box 6327		Building
	nassee, FL 32314	2661 E	xecutive Center Circle
		Tallah	issee, FL 32301

Articles of Amendment Articles of Incorporation



ROSS REHABILITATION SERVICES CORP

2012 AUG -8 PM 2: 20

(Name of Corporation as currently filed with the Florida Dept. of State) P11000039638

SLORE LARY OF STATE TALLAHASSEE FLORIDA

(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

ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "C	lorp," "Inc," or "Co". A pr	my," or "incorp ofessional corpor	The porated" or the abbre vation name must conto
ord "chartered," "professional association," or	the abbreviation "P.A."		
. <u>Enter new principal office address, if applie.</u> Principal office address <u>MUST BE A STREET A</u>			
			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	· <i>BOX</i>)		
			· · · · · · · · · · · · · · · · · · ·
		ida, enter the na	me of the
If amending the registered agent and/or reg new registered agent and/or the new registe		ida, enter the na	me of the
	red office address:		me of the
	red office address:		me of the
new registered agent and/or the new registe	red office address: (l'Iorida street address)		- -

•			Y	
address of each Officer (Attach additional sheets Please note the officered P = President; V = Vice Executive Officer; CFO held. President. Treasur. Changes should be noted a change, Alike Jones le Alike Jones, V as Remove	and/or I s, if neces irector tit Presiden = Chief er, Direct d in the fo	Director be sary) Let by the factor be the factor of the factor would be obtained to the factor would be of the factor with the factor would be of the factor would	s, enter the title and name of each officer eing added: irst letter of the office title: asurer: S=- Secretary: D= Director: TR= To Officer. If an officer/director holds more be PTD. canner. Currently John Doe is listed as the n. Sally Sm'th is named the V and S. These	Idirector being removed and title, name, and Trustee: C = Chairman or Clerk: CEO = Chief than one title, list the first letter of each office PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change.
Example: X Change	<u>PT</u>	<u>John Do</u>	<u>oc</u>	
X Remove	<u>V</u>	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	V		RIGOBERTO PEREZ	13549 SW 11TH LANE
Add		_	W 10-2	MIAMI, FL 33184
X Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4)Change		_		
Add				
Remove				
S) Change				
5) Clunge Add	***************************************			
Add				
Kemove				
6) Change				
Add		-		

Remove

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	
F. If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis
, , ,	TO ARTICLE IV, THE NUMBER OF SHARES
WILL BE AS FOLLOW:	
JUAN C. ROSS 100% OF	OWNERSHIP.
	-

The date of each amendment(s)	udoption: 07/26/2012
Effective date <u>if applicable</u> : 07	7/26/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK CNE)
☐ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voing group)
The amendment(s) was/were ac action was not required.	lopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were acceptance acce	lopted by the incorporators without shareholder action and shareholder
_{Dated} JULY	26, 2012 /
Signature	· · · · ·
(By a select	director, president or after officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
•	JUAN C. ROSS
	(Typed or printed name of person signing)
	PRESIDENT/DIRECTOR
	(Title of person signing)