

P11000043168

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2011 OCT -6 PM 2:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Amend

T Brown 10-7-11

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Elite therapy & Rehabilitation Center Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P11000043168.

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Daisy Cedron de Jarvis  
Name of Contact Person

Elite therapy & Rehabilitation Center Inc.  
Firm/Company

6001 NW 153 St # 178  
Address

Miami Lakes, FL 33014.  
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daisy Cedron at (786) 534 9775  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> \$35.00 Filing Fee       | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status                 |
| <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$52.50 Filing Fee, Certificate of Status & Certified Copy |

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
2011 OCT -6 PM 2:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Elite Therapy & Rehabilitation center, inc.  
(Name of Corporation as currently filed with the Florida Dept. of State)

P11000043168.

(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)

6001 NW 153 St  
# 178  
Miami Lakes, FL 33014.

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

6001 NW 153 St  
# 178  
Miami Lakes, FL 33014.

**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:

DAISY CEDRO DE JARVIS.

New Registered Office Address:

451 NE 35th STREET - apt. 101  
(Florida street address)

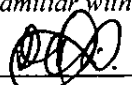
MIAMI

(City)

FL-33137  
(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 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>
P	Yelma Perez Santa Cruz	6001 NW 153 St #178 Miami Lakes FL 33014.	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
P	DAISY CEDRON	6001 NW 153 St #178 MIAMI LAKES FL 33014.	<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)

Yo Yelma Perez Santa Cruz quiero quitarme  
 como presidente de la Corporación  
 Elite Therapy & Rehabilitation Center, inc.  
 la nueva dñña es Daisy Cedron de Jarvis

**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: 9/23/11

Effective date if applicable: 9/23/11 (date of adoption is required)  
(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 9/23/11

Signature [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)

Yelma Perez Santa Cruz  
(Typed or printed name of person signing)

President - Owner  
(Title of person signing)