P11000058382

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SECUL OF CORPORATIONS
CHARLES OF THE BAR 1: 25

Amend 118,13

COVER LETTER

Division of Corporations NAME OF CORPORATION: CENTER OF ATTENTION & THERAPY SERVICE, INC DOCUMENT NUMBER: P11000058382 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **EDEINI LEMUS** Name of Contact Person CENTER OF ATTENTION & THERAPY SERVICE, INC Firm/ Company 14850 SW 26 ST SUITE 214 Address MIAMI, FL 33185 City/ State and Zip Code edeinis@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **EDEINI LEMUS** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee **□\$43.75** Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

TO: Amendment Section

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

is enclosed)

Articles of Amendment Articles of Incorporation of



CENTER OF ATTENTION & THERAPY SERVICE, INC

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

P11000058382

(Documer	nt Number of Corporation (if	known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	llorida Profit Corporation a	dopts the following ame
A. If amending name, enter the new na	ame of the corporation:		The
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	o". A professional corpor	orated" or the abbrevi
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		14850 SW 26 ST SUITE 214	
		MIAMI, FL 33185	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		14850 SW 26 ST SUITE 214	
		MIAMI, FL 33185	
D. <u>If amending the registered agent an</u>	d/or registered office addr	ss in Florida, enter the na	me of the
new registered agent and/or the new			
Name of New Registered Agent	EDEINI LEMUS		_
	14850 SW 26 ST	SUITE 214	
	(Florida stre	•	•
New Registered Office Address:	MIAMI	, Florida	33185
	(City)		(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the obligation	ns of the position.
Si	gnature of New Registered A	gent, 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)

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

P = President; V = Vice President; T = Treasurer; S = Secretary; 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	<u>PT</u> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sally	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	Р	LISSETTE ACEBAL	14850 SW 26 ST SUITE 214
Add X			MIAMI, FL 33185
Remove			
2) Change	Р	EDEINI LEMUS	14850 SW 26 ST SUITE 214
X Add	***************************************		MIAMI, FL 33185
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<u> </u>		
Add			
Remove			
6) Change			
Add			
Remove			

	dding additional sheets, if necessar	ry). (Be specif			
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an amendment	rovides for an	exchange, recla	ssification, or cancel	lation of issued shar	res.
rovisions for in	mplementing the	amendment if n	ot contained in the a	mendment itself:	
(if not applic	cable, indicate N/A	A)			
			NIA		
••			/		***********************
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·-			•		
			•		

The date of each amendmen	t(s) adoption: U1/10/2013
Effective date if applicable:	01/11/2013
Enecute date in special section .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
■ The amendment(s) was/we action was not required.	ere 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_01/	/11/2013
Signature _	
Š	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	EDEINI LEMUS
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)