

P11000071381

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6360

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 AUG 15 PM 3:42

COR AMND/RESTATE/CORRECT OR O/D RESIGN
AB MESSAGE REHABILITATION CORP

Certificate of Status	0
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Amend
10 8/15/11

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H11000203885

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: AB MESSAGE REHABILITATION CORP

DOCUMENT NUMBER: P11000071381

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALAIN BELLO ALDUNCIN

Name of Contact Person

Firm/ Company

2536 NW 24 CT APT 302

Address

MIAMI FL 33142

City/ State and Zip Code

abmassagereha@yahoo.com

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

For further information concerning this matter, please call:

ALAIN BELLO ALDUNCIN

Name of Contact Person

at (786)

468-9801

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

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

H11000203885

Articles of Amendment
to
Articles of Incorporation
of

AB MESSAGE REHABILITATION CORP

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

P11000071381

(Document Number of Corporation (if known))

FILED
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DIVISION OF CORPORATIONS
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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)

2536 NW 24 CT APT 302

MIAMI FL 33142

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:

ALAIN BELLO ALDUNCIN

2536 NW 24 CT APT 302

New Registered Office Address:

(Florida street address)

MIAMI

(City)

Florida 33142

(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	MAIRENA BLANCO	2536 NW 24 CT APT 302 MIAMI FL 33142	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
P	ALAIN BELLO ALDUNCIN	2536 NW 24 CT APT 302 MIAMI FL 33142	<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)

Please make the change in last name was written ALBUNCIN, the correct name is
ALDUNCIN.

↑

↑

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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The date of each amendment(s) adoption: _____
(date of adoption is required)

Effective date if applicable: 08/09/2011
(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 08/12/2011

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)

ALAIN BELLO ALDUNCIN
(Typed or printed name of person signing)

D
(Title of person signing)

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