P12000099115

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•	COVER LETTER		
TO: Amendment Section Division of Corporations			The Control of the Co
NAME OF CORPORATION: KENDALL W	ALK RECOVERY, INC.		
DOCUMENT NUMBER: P12000099115			14 P. 1972
The enclosed Articles of Amendment and fee a	re submitted for filing.		O. O.
Please return all correspondence concerning this	s matter to the following:		,
Michael J. Schlesinger, I	Esq.		
	Name of Contact Perso	n	
SCHLESINGER & ASSOCIATES, P.A.			
Firm/ Company			
800 BRICKELL AVENUE, SUITE 1400			
	Address		
MIAMI, FL 33131			
	City/ State and Zip Cod	le	
MJS@MJSJD.COM; ESERV	ICE@MJSJD.COM		•
E-mail address: (to	be used for future annual report	notification)	
For further information concerning this matter,	please call:		
MICHAEL SCHLESINGER	at (305	373-8993	
Name of Contact Person		ode & Daytime Telephone Number	
Enclosed is a check for the following amount m	ade payable to the Florida Dep	artment of State:	
\$35 Filing Fee		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ameno Divisio	Address dment Section on of Corporations Building	

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

KENDALL WALK RECOVERY INC

RENDALL WALK RECOVERT, INC.	
(<u>Name of Corporation</u>	on as currently filed with the Florida Dept. of State)
P12000099115	
(Docum	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the c	d "corporation," "company." or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	ra Ka
MATERIAL DESCRIPTION OF THE BOY	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, enter the name of the
Name of New Registered Agent	
	(Florida street address)
Num Basistan J. Office A. I.I.	
New Registered Office Address:	, Florida
	· ,
New Registered Agent's Signature, if changing Regis	
t hereby accept the appointment as registered agent. I	am familiar with and accept the obligations of the position.
Signa	ture 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)

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>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	P	ROBERT G. HARDEN	9260 SW 142 ST
Add			MIAMI, FL 33176
X Remove			
2) Change		-	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change		N	
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
 	
	to the state of th
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adop date this document was signed.	tion;	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depar	ck does not meet the applicable statutory filing requirements, this date tunent of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte by the shareholders was/were suffice	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statement ch 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 adopte action was not required.	ed by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated	18/16 Na Harles	
(By a direct selected, b	etor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	·············
IR	MA HARDEN	
	(Typed or printed name of person signing)	
PE	ERSONAL REPRESENTATIVE OF ROBERT G. HARDEN	
	(Title of porson signing)	