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FEB 14 2019

S. YOUNG

9 FEB -8 PM 6: 1

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: AJ Therapy Center	, Inc.		
DOCUMENT NUMBI				
The enclosed Articles of	f Amendment and fee are su	bmitted for filin	g.	
Please return all corresp	ondence concerning this ma	tter to the follow	ving:	
A	Alex A. Menendez			
_		Name of Co	ntact Persor	1
A	J Theray Center, Inc.			•
_	 	Firm/ Co	ompany	·
6	107 Memorial Hwy. Suite C			
_		Add	ress	
ר	ampa/Florida 33615			
_		City/ State ar	nd Zip Code	e
		•	•	
pharaie	ex@hotmail.com E-mail address: (to be us			modification)
	E-mail address: (to be us	sed for future an	nuai report	notineation)
For further information	concerning this matter, pleas	se call:		
		c	.12	545 7350
Alex A. Menendez		at (de & Daytime Telephone Number
Name of	Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the F	lorida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fili Certified Co (Additional enclosed)	ору	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 nassee, FL 32314		Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

AJ Therapy Center, Inc.				
(Name	of Corporation as curre	ntly filed with the Flor	rida Dept. of State)	
P13000013695				
	(Document Numbe	r of Corporation (if kno	wn)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, tl	nis <i>Florida Profit Corpe</i>	oration adopts the following amer	idment(s) to
A. If amending name, enter the new na	ame of the corporation:			
N/A			The	new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," o	r "Co". A professiona	"incorporated" or the abbrevia	ation
B. Enter new principal office address,	if applicable:	N/A	72.19	
(Principal office address MUST BE A S				_ -n
			<u> </u>	-:
			ပိုး ထ	<u>-</u> :71
C. Enter new mailing address, if appl	icable:	27/4		2 ·3)
(Mailing address MAY BE A POST		N/A		<u>n</u>
				5
				_
D. If amending the registered agent an new registered agent and/or the new			r the name of the	
	Ramon Jimenez			
Name of New Registered Agent	6107 - Memorial Hwy.	Suita C		
	Tampa	street address)	33615	
New Registered Office Address:	Tampa	(City)	, Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Age	ent:		
I hereby accept the appointment as regist			bligations of the position.	
		1		
	Signature of New	w Registered Agent, if ch	hanging	

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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally St	nith_	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	V	_	Yadenis Jimenez Calvo	6107 - Memorial Hwy.
X Add				Suite G
Remove				Tampa, FL 33603
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

. If amending or adding additional Arti (Attach additional sheets, if necessary).	
-	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
-	
·	

The date of each amendment(s) date this document was signed.	adoption:, if other th
_	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder
January	31, 2019
Dated	
Signature	
(By	director, president or other officer - if directors or officers have not been
selec	cted, by an incorporator – if in the hands of a receiver, trustee, or other court
арро	ointed fiduciary by that fiduciary)
	Ramon Jimenez
	(Typed or printed name of person signing)
	President
	(Title of person signing)