P13000055667

| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ad | ldress) | <u></u> |
| (Ad | dress) | |
| (Cit | ty/State/Zip/Phone | ÷#) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| (Do | cument Number) | · |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |





200267304142

12/12/14--01018--008 **35.00



(PRM) 12-16-14

COVER LETTER

TO: Amendment Section Division of Corporations



| NAME OF COR | PORATION: Florida R MBER: P13000055 | ehabilitation C 667 | enter Corp. | TALLAH, — |
|------------------------|---------------------------------------------|--------------------------------------------------------------------|----------------------------------------------------------------------------------------|--------------|
| The enclosed Artic | eles of Amendment and fee are su | abmitted for filing. | | |
| Please return all co | prespondence concerning this ma | atter to the following: | | |
| | Dunay Aguiar | | | |
| | <u> </u> | Name of Contact Person | l | |
| | Florida Rehab | ilitation Centei | Corp. | |
| | | Firm/ Company | | |
| | 815 NW 57 AV | /E SUITE 204 | | |
| | 141A141 EL 004 | Address | | |
| | MIAMI, FL 331 | | | |
| | | City/ State and Zip Code | · | |
| | E-mail address: (to be u | sed for future annual report | notification) | |
| For further inform | ation concerning this matter, plea | se call: | | |
| DUNAY A | AGUIAR | at (786 | 374-9858 | |
| Name of Contact Person | | | de & Daytime Telephone | Number |
| Enclosed is a chec | k for the following amount made | payable to the Florida Depa | rtment 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

Articles of Amendment to Articles of Incorporation of

FLORIDA REHABILITATION CENTER CORP

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

P13000055667

FILED

14 DEC 12 PM 4:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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:

| me must be distinguishable and contain Corp.," "Inc.," or Co.," or the designation of "chartered," "professional association | n "Corp," "Inc," or "Co". A prof | | |
|------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-------------------|----------|
| • • | | | |
| Enter new principal office address, if a rincipal office address MUST BE A STRE | | | |
| | · · · · · · · · · · · · · · · · · · · | | |
| | | | |
| Enter new mailing address, if applicab | la: | | |
| (Mailing address MAY BE A POST OF) | | | |
| | | | |
| | | | |
| | | | ······ |
| | | | |
| If amending the registered agent and/or | r registered office address in Florid | a, enter the name | e of the |
| If amending the registered agent and/or new registered agent and/or the new re | r registered office address in Florid gistered office address: | a, enter the name | e of the |
| new registered agent and/or the new re | r registered office address in Florid gistered office address: | | e of the |
| new registered agent and/or the new re | gistered office address: | | e of the |
| new registered agent and/or the new re | gistered office address: | | e of the |
| new registered agent and/or the new re | gistered office address: | | |
| Name of New Registered Agent | gistered office address: (Florida street address) | | |
| Name of New Registered Agent | gistered office address: (Florida street address) | | |
| Name of New Registered Agent | gistered office address: (Florida street address) (City) | | |

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 Doe | | |
|-------------------------------|-----------|--------------------|-----------------|--|
| - | | | | |
| X Remove | <u>V</u> | Mike Jones | | |
| X Add | <u>SV</u> | Sally Smith | | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s | |
| 1) Change | Р | OMAR ORTEGA | 815 NW 57 AVE | |
| Add | | - | SUITE 204 | |
| Remove | | | MIAMI, FL 33126 | |
| 2) Change | Р | DUNAY AGUIAR | 815 NW 57 AVE | |
| Add | | | SUITE 204 | |
| Remove | | | MIAMI, FL 33126 | |
| 3) Change | <u>C</u> | ALBA PERERA-RIVERA | 815 NW 57 AVE | |
| Add | | | SUITE 204 | |
| Remove | | | MIAMI, FL 33126 | |
| 4) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
| Add | | , | | |
| Remove | | | | |
| 6) Change | | | | |
| Add | | | 44 | |
| Remove | | | | |

| | nal sheets, if nece | ssary). (Be spe | cijic) | | | |
|------------|---------------------|-----------------|------------------|--------------------|-------------------|--|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | - | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | · | |
| | | | | | | |
| | | | | . | | |
| | <u> </u> | | | | | |
| | | | | | | |
| | | <u></u> | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | pr | | | | | |
| | | | | | | |
| -, | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| • | | | 1 102 - 41 | 2 | . C. t | |
| an amenum | ent provides for | an exchange, re | if not contained | or cancellation of | or issued snares, | |
| (if not ap | plicable, indicate | e N/A) | ii not containet | in the amenda | ent usen. | |
| ., ., | | , | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | * | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| | loption: | , if other than the |
|------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| date this document was signed. | | |
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were ado by the shareholders was/were su | pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval. | |
| The amendment(s) was/were app must be separately provided for | roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): | |
| | for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| The amendment(s) was/were ado action was not required. | pted by the board of directors without shareholder action and shareholder | |
| The amendment(s) was/were ado action was not required. | pted by the incorporators without shareholder action and shareholder | |
| Dated 11/17/20 | 014 | |
| Signature (By a di | rector, pesident or other officer – if directors or officers have not been | |
| sele <i>q</i> ted | d. by an incorporator – it in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary) | |
| | DUNAY AGUIAR | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |

(Title of person signing)

STOCK PURCHASE AGREEMENT

THIS STOCK PURCHASE AGREEMENT (the "Agreement") is made and effective on October 18, 2014, by and between Dunay Aguiar ("Buyer"), and Omar Ortega ("Seller").

WHEREAS, the Seller is the record owner and holder of the 50 % issued and outstanding shares of the capital stock of Florida Rehabilitation Center Corp ("Corporation"), a Florida corporation, which Corporation has issued capital stock of 100 shares having an individual par value of \$1.00;

WHEREAS, Buyer desires to purchase all of Seller's stock in Florida Rehabilitation Center Corp (the "Shares");

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged; the parties agree as follows:

- 1. <u>Purchase and Sales</u>. Seller agrees to sell and Buyer agrees to purchase 100% of the Seller's stock in Florida Rehabilitation Center Corp on the terms and conditions of this Agreement.
- 2. <u>Purchase Price</u>. The total purchase price shall be Seventeen Thousand Five Hundred Dollars (\$17,500.00). The total purchases price shall be payable by Buyer at closing.
- 3. Closing. The closing of the transactions contemplated hereby ("Closing") shall take place at 815 NW 57 Ave Suite 204, Miami, Fl 33126 on October 18, 2014.
 - At the Closing, Seller shall deliver certificates representing 100 % of his Shares in Florida Rehabilitation Center Corp, duly endorsed in blank and free and clear of all liens, claims, charges or other encumbrance
 - Seller shall also deliver to Buyer at Closing, all other documents required of Seller for closing of the stock transfer hereunder.
- 4. <u>Nonassumption of Liabilities</u>. Except as otherwise agreed expressly in writing, Buyer does not and shall not assume or agree to pay any of Seller's or, where applicable, any shareholder's liabilities or obligations of any nature or kind. Seller and, where applicable, any shareholder, shall each remain responsible for their respective debts and obligations.
- 5. Organization and Standing: Corporation is a corporation duly organized, validly existing and in good standing under the laws of the State of Florida and has the corporate power and authority to carry on its business as it is now being conducted.
- 6. <u>Final Agreement</u>. This Agreement represents the full agreement between the parties and supersedes any and all prior negotiations and understanding between them. This Agreement may not be modified or amended except by a written instrument executed by the shareholders of the Corporation Florida Rehabilitation Center Corp.

D.A.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement on the day and year first above written.

| (Instit | |
|-------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|
| Omar Ørtega Florida Rehabilitation Center Corp Seller | |
| au | |
| Dunay Aguiar Buyer | |
| Sworn to and Subscribed before me this3 | day of <u>December</u> , 20 14. |
| | MERCEDES MAYULY RIVERO Notary Public - State of Florida My Comm. Expires Mar 3, 2017 Commission # EE 879511 |
| Signature of Notary | Notary Seal |
| Said person is personally known to me () | Or provided identification in the form of Diwi Lunse. |
| Type/Print | MERCEDES MAYULY RIVERO |
| | Notary Public - State of Florida My Comm. Expires Mar 3, 2017 |