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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : 120000000146

Phone : (305)444-4994 Fax Number : (305)444-4977

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

Email	Address:	

COR AMND/RESTATE/CORRECT OR O/D RESIGN BUENOS AIRES THERAPY CENTER INC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

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Articles of Amendment

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;	to Articles of ln of	corporation	ř	00 m 10	: 90
BUENOS AIRES THERAPY CENTER I	NC				
(Name o	f Corporation as current	iv filed with th	ne Florida De	ept. of State)	
220000023982					
	(Document Number of	of Corporation	(if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit	t Corporation	radopts the follov	ving amendment(s)
. If amending name, enter the new na	ime of the corporation:				
					Nie new
name wast be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	'orp," "Inc," or "Co".	A professiona	"incorporate Leorporation	d" or the abbrevior name must con	ation "Corp.," tain the word
3. Enter new principal office address,	if applicable:	5600 SW	135 AVE STI	E: 112	
Principal office address MUST BE A S	TREET ADDRESS	MIAMI, F	L 33183	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	OFFICE BOX)				
 If amending the registered agent ar new registered agent and/or the new 	id/or registered office address	dress <mark>in Florid</mark> is:	a, enter the	name of the	
	CHANGE OF ADDRESS				
Name of New Registered Agent	5600 SW 135 AVE STE:	112			
	(Florida s	ireet address)			
New Revisured Office Address:	MIAMI			, Florida	3
New Registered Office Address.		(City)	····		Zip Code)
New Registered Agent's Signature, if c Thereby accept the appointment as regist	hanging Registered Aver tered agent. I am familian	nt: - with and acce	pt the obligat	tions of the positio	on.
	Signature of New	Registered Ago	ns, ij changir	ng	
Check if applicable	overnant to c. 607 0124 (4.1	16) FS			

Example:

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 curporation, 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.

X Change	51	John Doe	
\underline{X} Rевюус	$\underline{\mathbf{y}}$	Mike Jones	
X Add	<u>şv</u>	Salty Smith	
Type of Action (Check One)	Title	Name	Address
1) XX Change	₽	CHANGE OF ADDRESS	5600 SW 135 AVE STE: 112
Add			MIAMI, FL 33183
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additio	or adding additional Articles, enter change(s) here: onal sheets, if necessary). (Be specific)	
·		
		
provisions fo	nent provides for an exchange, reclassification, or cancellation or implementing the amendment if not contained in the amendment opticable, indicate N/A)	of issued shares, meat itself:
		<u> </u>

10/22/2020	r than the
The date of each amendment(s) adoption:	. man me
Effective date if applicable:	-
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list document's effective date on the Department of State's records.	ted as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.	er
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)	
Dated 10/22/2020 Signature Signature	
(By a director, president of 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)	
MARIA I. BARRAGUE	_
(Typed or printed name of person signing)	_
P	_
(Title of person signing)	