

P21000023336

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

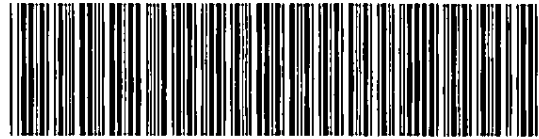
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Physio Active Therapy & Wellness
DOCUMENT NUMBER: P21000023336

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

Please return all correspondence concerning this matter to the following:

Fernando A' Morel
Name of Contact Person
Physio Active Therapy & Wellness corp.
Firm/ Company
8964 SW 212 LN
Address
Cutler Bay FL 33189
City/ State and Zip Code
Fmorel1977@Gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Fernando A' Morel at (305) 345 80 30
Name of Contact Person 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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Articles of Incorporation
of
PHysio Active Therapy & Wellness, Corp.
(Name of Corporation as currently filed with the Florida Dept. of State)

P21000023336
(Document Number of Corporation (if known))

☒ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:

☒ Change PT John Doe
☒ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

1) ☐ Change

☒

Hilda Tabora

8964 SW 212 LN

☒ Add

CUTLER Bay FL 33189

☐ Remove

2) ☐ Change

☐

☐ Add

☐ Remove

3) ☐ Change

☐

☐ Add

☐ Remove

4) ☐ Change

☐

☐ Add

☐ Remove

5) ☐ Change

☐

☐ Add

☐ Remove

6) ☐ Change

☐

☐ Add

☐ Remove

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STAMPED

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867-9

50% Corporation Shares to be
Assigned to : Hilda Tabora.

100

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The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable:

08/30/22
(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 listed as the document's effective date on the Department of State's records.

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.

☒ 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 _____

[Signature]
(voting group)

Dated _____

07/28/22

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)

Fernando A. Morel

(Typed or printed name of person signing)

President

(Title of person signing)

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FILED