8/10/22, 10:20 AM



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000270050 3)))



H220002700503ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : 🖅 (850)617-6380

From:

Account Name : AGENTS AND CORPORATIONS, INC

Account Number : I20010000112

: 藍 (302)575-0875

: ੌ (302)575-1642 Fax Number

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 THOMAS CENTER FOR PHYSICAL THERAPY, P.A.

المعاور والمفاقد أمرانا والمراجع المستحدد والأناف أفال أخاره الباش	to the state of th
Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

J. HORNE

AUG 1 2 2022

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment
to
articles of lacorporation

	;				50	
Artic	es of Am	endment			100	E 1
Article	to es of lacor	rporation				
THOMAS CENTER FOR PHYSICAL THERAPY, P.A.	of	•			زوگري دريک	TILLE 10 至。
Parconnances (Name of Corporation as c	corrently	filed with the FI	orida Dept.	of State)	•	مِــــــ
P22000042635	:					9
(Document N	umber of (Corporation (if ke	nown)	- ··-		
Pursuant to the provisions of section 607,1006, Florida Statut its Articles of Incorporation:	tes, this F	lorida Profit Cor	poration ado	pts the follo	wing amendm	oent(s) to
A. If amending name, enter the new name of the corpora THOMAS CENTER FOR PHYSICAL THERAPY, INC.	<u>tion:</u>					
name must be distinguishable and contain the word "corporate "Inc." or Co." or the designation "Corp." "Inc." or "chartered," "professional association," or the abbreviation	7 A	mpany," or "theo professional cor	orporated" o poration nar	r the abbrevi ne must cor	The ne iation "Corp., stain the wor	
B. Enter new principal office address, if applicable: (Principal office address MUST RE A STREET ADDRESS	ξ					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)						
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office.	ire ndåre address:	ss in Florida, en	for the name	of the		
Name of New Registered Agent						
(PT	lorida strea	i address)		<u>_</u>		
New Registered Office Address:				21 14		
7,500,570	(0	in)		Florida	(ip Code)	
	!					
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	d Ageat: amiliar wii	h and accept the	obligations e	of the positio	91.	
Signature of	New Reg	istered Agent, if a	changing	 		
Check if applicable	,	•	- •			
☐ The amendment(s) is/are being filed pursuant to \$. 607.012	. 20 (11) (c)	, F.S.				

If amending the Officers and/or Directors, enter the title a	nd name of each officer/director being removed and title, name, and
address of each Officer and/or Director being added:	being removed and thie, traine, and

(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	PT	John Do	<u>c</u>	! ! !	
X Remove	Y	Mike Jos	EG4	; ' ; ' 1	•
X Add	<u>sv</u>	Sally S:T	<u>nith</u>		•
Type of Action (Check One)	Title		Name	 	Address
l) Change		_		i i	
Add					
Кеточе				1	
2) Change		_			-
Add					
Remove Change				'	
Add					
Remove				!	
4) Change					
Add				<u> </u>	
Remove					
5) Change					
Add					
Remove					
δ) Change					****
Add					
Remove					

[Attach additional sheets, if necessary]. (Be specific)	4(s) ho	<u>re</u> :
(Authors additional sheets, if necessary). (Be specific)	'	
	 	
	!	
	 	
	+ :	
	:	
	<u>l</u> ::	
	1	
	;	
	+ +	
	 	
	į	
	 - 	
Kon omendarant annida of the control		
. If an amendment provides for an exchange, reclassification provisions for implementing the amendment if not continuous to the amendment is not continuous.	alion, p	r capcellation of issued shares,
(if not applicable, indicate N/A)	nearth Cr	in the amendment uselt:
,, , , , , , , , , , , , , , , , , , , ,		
	 ;	
	<u> </u>	
	1 :	
	:	
	,	
	:	
	:	

The date of each amendment(s) adoption:date this document was signed.		, if other than the
Effective date if applicable:		
(no mo	re than 90 di	ays after amendment file dutc)
Note: If the date inserted in this block does not meet a document's effective date on the Department of State's r	he applicable	be statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK O	ADE)	
☐ The amendment(s) was/were adopted by the incorporaction was not required.	ators, or boa	erd of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficient for approval.	ders. The na	number of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareho must be reparately provided for each voting group en	olders throug	th voting groups. The following statement to separately on the amendment(s):
"The number of votes east for the amendment(s		
by(voting group		
(voting group	이	· · · · · · · · · · · · · · · · · · ·
August 8, 2022		
Dated		
· · · · · ·		
Signature By a director posidery or	7.	- if directors grofficers have not been
selected by an incorporator	if in the h	and of a receiver, trustee, or other court
appointed fiduciary by that	fiduciary)	
Megan Kearney		
(Typed o	r printed nat	pe of person signing)
President President	. printed dan	ne or herson arkmuk)
(Title of	person signin	ng)
,		