## P930005650Q

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	<del>" -</del>
SUBJECT: CLINICAL REHAB - CENTER , INC (Name of Corporation)	<del></del>
DOCUMENT NUMBER: P93000056502	
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filin	g.
Please return all correspondence concerning this matter to the following:	
MARIELA MONTESINO (Name of Person)	- · <del>-</del> ·
CLINICAL REHAB-CENTER , INC (Name of Firm/Company)	May go f si
2020 SW 1 ST SUITE 100 (Address)	ر در د
MIAMI FL 33135  (City/State and Zip Code)	
For further information concerning this matter, please call:	
MARIELA MONTESINO at (305) 303-0583 (Name of Person) (Area Code & Daytime Telephone Number)	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.	orporation

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

## ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION OF



CLINICAL REHAB-CENTER, INC

(Present Name)

## P3 P93000056502

(Document Number of Corporation (If known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the following Articles of Amendment to its Articles of Incorporation:

FIRST: Amendment(s) adopted: (indicate article number(s) being amended, added or deleted)

ALL ISSUED AND OUTSTANDING STOCKS ( 1000 SHARES ) TRANSFERED FROM ARMANDO FIGUEREDO TO MARIELA MONTESINO FOR MONETARY CONSIDERATION.

RESIGNATION OF REGISTERED AGENT ARMANDO FIGUEREDO AND NEW REGISTERED AGENT APPOINTED MARIELA MONTESINO.

NEW OFFICER AND DIRECTOR ELECTED:

ADDRESS:

MARIELA MONTESINO 9110 SW 134 PL MIAMI FL 33186 Registered Agent President and Director

**SECOND:** If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

THIRD: T	he date of each amendment's adoption:	
FOURTH:	Adoption of Amendment(s) (CHECK ONE)	
X	The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) 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	
	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
	The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
	Signed this 30 th day of OCTOBER 2003	<u>-</u>
	Signature:    I hereby accept designation as Registered Agent	 ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	MARIELA MONTESINO (Typed or printed name of person signing)	٠
	PRESIDENT	
	(Title of person signing)	