

Division of Corporations Public Access System

Electronic Filing Cover Sheet

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.

(((H07000211178 3)))



H070002111783ABC.

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)205-0380

Account Name

: EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I2000000146 Phone

: (305)444-4994

Fax Number

: (305)444-4977

COR AMND/RESTATE/CORRECT OR O/D RESIGN

TOTAL CARE HEALTH CENTER, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$35.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

302444926

ECL2

845 SS S007 0:55

(((H07000211178)))

Articles of Amendment to Articles of Incorporation

TOTAL CARE HEALTH CENTER, INC.

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

P96000094604

(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:

NEW CORPORATE NAME (if changing):

| (Must contain the word "corporation," "company," or "in (A professional corporation must contain the word "char | ncorporated" or the abbreviation "Corp.," "Inc.," or "Co.") rtered", "professional association," or the abbreviation "P.A.") | |
|---|--|--|
| AMENDMENTS ADOPTED- (OTHER TH. and/or Article Title(s) being amended, added on | AN NAME CHANGE) Indicate Article Number(s) r deleted: (BE SPECIFIC) | |
| PLEASE ADD: | | |
| CESAR DE LA TERGA - PD | CHRISTINA ALONSO - S | |
| 8498 S.W. 8TH STREET | 8498 S.W. 8TH STREET | |
| MIAMI FL 33144 | MIAMI FL 33144 | |
| | | |
| | | |
| | • | |
| | | |
| | | |
| (Attach additional pages if necessary) | | |
| | sification, or cancellation of issued shares, provisions and in the amendment itself: (if not applicable, indicate N/A) | |
| | | |
| | | |
| (continued) | | |

OT NIG 22 PM 3:53

(((H07000211178)))

| The date of each amendment(s) adoption: AUGUST 22ND 2007 | | |
|--|---|--|
| Effective date if applicable: | | |
| (no more than 90 days after amendment file date) | | |
| Adoption of Amendment(s) | (CHECK ONE) | |
| | vas/were approved by the shareholders. The number of votes cast for the shareholders was/were sufficient for approval. | |
| | vas/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote sendment(s): | |
| "The number of | votes cast for the amendment(s) was/were sufficient for approval by | |
| | (voting group) | |
| The amendment(s) wand shareholder action | vas/were adopted by the board of directors without shareholder action on was not required. | |
| The amendment(s) we shareholder action w | vas/were adopted by the incorporators without shareholder action and as not required. | |
| selecte | rector, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary) | |
| CES | AR DE LA TERGA | |
| | (Typed or printed name of person signing) | |
| PRE | SIDENT | |
| | (Title of person signing) | |

FILING FEE: \$35