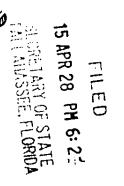
P980000a3385

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
\	PICK-UP WAIT MAIL
\	(Business Entity Name)
-	(Document Number)
	Copies Certificates of Status
	ructions to Filing Officer:
	Office Use Only



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04/27/15--01022--017 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SportFit Re	ehab & Training	, Inc.
	P9800002338		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	condence concerning this man	tter to the following:	
(Gregory P. Borgo		
Ş	Borgognoni Law,	Name of Contact Person	1
_		Firm/ Company	
	2525 Ponce de L	•	e 300
		Address	
(Coral Gables, FL	. 33134	
_	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code	3
		·	
gb@	gbrflaw.com		19 4 8 7 7 8 B
	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
			5/15 /
Gregory Borg	ognoni	_{at (} 305	671-3323
Name of	Contact Person	: Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	ertment of State:
S35 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)
Amer Divis P.O. I	ng Address Idment Section Idment Sec	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle ussee, FL 32301

Articles of Amendment to Articles of Incorporation of

SportFit Henab & Traini	ng, Inc.	anida Dant of Stata)	
P98000023385	currently thea with the Fi	eriaa Dept. of State	
	nt Number of Corporation (if	known)	<u> </u>
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	Florida Profit Corporation adopts the follo	wing amendment(s) to
A. If amending name, enter the new na	ime of the corporation;		
Kearns Physical Therap			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	," "company," or "incorporated" or the Co". A professional corporation name m P.A."	e abbreviation ust contain the
• •		N/A	
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>			
C. Enter new mailing address, if applications and address MAY BE A POST		N/A 🔌	— — ∵
D. If amending the registered agent an new registered agent and/or the new			APR 28 PM 6: 2:
	N/A	•	6: 2 6: 2
Name of New Registered Agent			夏 邢 110
	(Florida stre	eet address)	
New Registered Office Address:	N/A	. Florida	
Wen Registered Office Address.	(City)	(Zip Code,	,
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the obligations of the position	on.
C:	anatuma of Many Positoread A	and if chaming	

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: X Change	<u>PT</u>	John Do	c	
X Remove	Ā	Mike Jo	nes	
X Add	<u>SV</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	 	.	N/A	
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		- .		
Add				
Remove				A 4.47 - 4.47 - 117
6) Change				
Add				
Remove				

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
I/A	
	
•	
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·····	
If an amandment pushidas for an aval	hance realization or cancellation of issued shares
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(i) an appareame, maieure 1971)	
I/A	

date this document was signed.	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
doption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement 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)
	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated April 20 Signature	2015) 1A CLL
(By a d selecte	irccior, 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)
	Lisa, Kearns
	(Typed or printed name of person signing)
	President
	(Title of person signing)