

P990000077376

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(City/State/Zip/Phone #)

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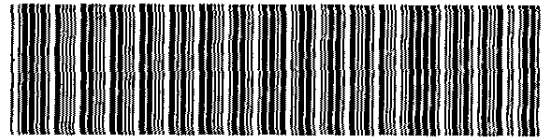
(Business Entity Name)

(Document Number)

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FILED

04 SEP 21 AM 11:41

CLERK OF STATE
TALLAHASSEE, FLORIDA

Amend
MD 9/28

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: NEW AGE REHAB INC..

DOCUMENT NUMBER: P99000077376

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

Please return all correspondence concerning this matter to the following:

LUZ AMPARO BELTRAN

(Name of Contact Person)

NEW AGE REHAB, INC.

(Firm/ Company)

2248 SW 152 PLACE

(Address)

MIAMI, FL. 33185

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

LUZ AMPARO BELTRAN

(Name of Contact Person)

at (305)

229-7261

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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
409 E. Gaines Street
Tallahassee, FL 32399

Articles of Amendment
to
Articles of Incorporation
of

NEW AGE REHAB, INC.

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

P99000077376

(Document number of corporation (if known))

04 SEP 21 AM 11:41
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

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):

N/A

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

ARTICLE II: DELETE THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS:

3600 S. STATE ROAD 7 - SUITE 250 - MIRAMAR, FL. 33023

THE FOLLOWING PRINCIPAL PLACE OF BUSINESS SHALL BE:

1790 WEST 49 STREET - SUITE 400-5 - HIALEAH, FL. 33012

MAILING ADDRESS: 2248 S. 152 PLACE - MIAMI, FL. 33185

ARTICLE VII: DELETE THE FOLLOWING OFFICER AND DIRECTOR:

SOLANGE V. CHARLES, V.P.

THE FOLLOWING SHALL BE:

LUZ AMPARO BELTRAN, PD, VP, SECRETARY, TREASURER AND DIRECTOR

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

N/A

(continued)

The date of each amendment(s) adoption: SEPTEMBER 14, 2004

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

☒ The amendment(s) was/were approved 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 _____"
(voting group)

☐ 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 14th day of SEPTEMBER, 2004

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)

LUZ AMPARO BELTRAN

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE: \$35