## P12000088992

(Re	questor's Name)	
(Ad	dress)	<u></u>
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
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(Bu	siness Entity Na	me)
(Do	ocument Number	)
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Manl Ch 8 04,9,13

## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJ	<sub>вст:</sub> Name Change о	E "AT YOUR SERVICE ELDER CARE
DOC	Name UMENT NUMBER: P12000088	of Corporation 992
The er	nclosed Amendment and fee are subm	itted for filing.
Please	return all correspondence concerning	this matter to the following:
Lisa	a Miller	
	Name of Contact Person	<del></del>
At `	Your Service Elder C	are, Inc.
	Firm/Company	
161	17 San Damian Rd	
	Address	<del></del>
Tal	lahassee, FL 32303	
	City/State and Zip Code  Miller10@aol.com  -mail address: (to be used for future annu	ial report notification)
For fu	rther information concerning this matt	ter, please call:
Lisa	a Miller	at (850 ) 556-8987 Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclos	sed is a check for the following amour	nt:
	\$35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status	
Amen Divisi P.O. B	ng Address: dment Section on of Corporations Box 6327 lassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



At Your Service Elder Care, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P12000088992 (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: A. If amending name, enter the new name of the corporation: At Your Service Elder Helpers, Inc. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 1617 San Damian Rd. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) Tallahassee, FL 32303 C. Enter new mailing address, if applicable: Same (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Same Name of New Registered Agent (Florida street address) Same New Registered Office Address: , Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			<del></del>
Remove			
3)Change			
Add			
Remove			\
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

mending or adding additional Articles, enter change(s) here: each additional sheets, if necessary). (Be specific)		
NAME	CHANGE	
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amendment provisions for imple (if not applicable	vides for an exchange, reclassification nenting the amendment if not contain indicate N/A)	or cancellation of issued shares, ed in the amendment itself:

The date of each amendmen	t(s) adoption: 3/30/2013
Effective date <u>if applicable</u> :	2/20/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	re adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder action and shareholder
action was not required.	·
Dated 3/2	
Signature _	Join Q Milly
S	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)
	Lisa D. Miller
	(Typed or printed name of person signing)
	CEO
	(Title of person signing)