## P17000053345

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## COVER LETTER

		COVER LETTER	•	
TO: Amendment Section Division of Corporations				26 H 9: 10
NAME OF CORPORATION:	Life Home	Services Inc		E 2
DOCUMENT NUMBER:	P1700005	3345Grs		<b>万</b> 宝宝
The enclosed Articles of Amend	<i>lment</i> and fee are su	bmitted for filing.		<b>4</b>
Please return all correspondence	concerning this ma	tter to the following:		5
	Grisel P	'ena		
-		Name of Contact Pers	on	
	Life Hor	ne Services Inc		
		Firm/ Company		
	2121 W	Flagler Street		
		Address		
	Miami, F	FL 33125		
		City/ State and Zip Co	ode	
		2017@gmail.com   sed for future annual repo	rt notification)	
Laili	an addicss. (to be us	sed for rature annual repo	it notification)	
For further information concern	ing this matter, pleas	se call:		
Grisel Pena		at ( 786	) 296-3782	
Name of Contact	Person	Area C	ode & Daytime Telephone Number	
Enclosed is a check for the follo	wing amount made	payable to the Florida De	 partment of State: 	
	3.75 Filing Fee & rtificate 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 Add Amendment S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7	Amei Divis Clifto 2661	Address adment Section ion of Corporations on Building Executive Center Circle hassee, FL 32301	

## Articles of Amendment to Articles of Incorporation

Life Home Services Inc	
(Name of Corporation as currently file	d with the Florida Dept. of State)
P17000053345	
(Document Number of Corp	oration (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flori</i> its Articles of Incorporation:	da Profit Corporation adopts the following amendmen
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	A professional corporation name must contain the
D. If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	n Klorida, enter the name of the
Name of New Registered Agent	
(Florida street ad	drėss)
New Registered Office Address:	, Florida
(City)  New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with a	

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.

X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change	<u>P</u>	Pena, Pena	2121 W Flagler St
Add			Miami, FL 33125
X Remove			
2) Change	Р	Pena, Grisel	2121 W Flagler St.
X Add			Miami, FL. 33125
Remove			
3) Change			
Add			
Remove			·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

Attach additional sheets, if necessary). (Be specific)	
<u> </u>	
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an amenument provides for an exchange, reclassification, or cal	he amendment itself:
provisions for implementing the amendment if not contained in t	
or an exchange, reclassification, or can exchange, reclassification, or can brovisions for implementing the amendment if not contained in the	
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provisions for implementing the amendment if not contained in t	
an amendment provides for an exchange, reclassification, or case provisions for implementing the amendment if not contained in the (if not applicable, indicate N/A)	
provisions for implementing the amendment if not contained in t	
provisions for implementing the amendment if not contained in t	

The date of each amendment(s) adoption:	06/19/2017	, if other than the
late this document was signed.		
Effective date <u>if applicable</u> : Of	5/19/2017	
	(no more than 90 days aft	er amendment file date)
Note: If the date inserted in this block does document's effective date on the Department		 nory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for		of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each voti		
"The number of votes cast for the an	nendment(s) was/were sufficient	for approval
by		.,
(1	voting group)	
☐ The amendment(s) was/were adopted by the action was not required.	he board of directors without s	hareholder action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	ne incorporators without sharel	holder action and shareholder
Dated 07/24/2017 Signature	<del></del>	
(By a director, pr selected, by an ir		ectors or officers have not been a receiver, trustee, or other court
Gr	isel Pena	
	(Typed or printed name of p	erson signing)
Ov	wner	
<del></del>	(Title of person	signing)