

728509

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

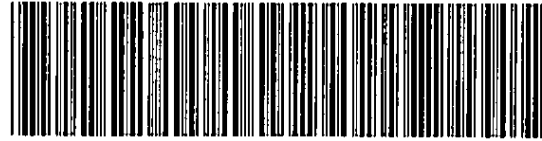
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100361647121

03/18/21--01028--011 \*\*35.00

FILED  
JUL 19 PM 12:26  
CLERK OF STATE  
TALLAHASSEE, FL

JUL 0 2021

## COVER LETTER

Department of State  
Amendment Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: United Home Care Services, Inc.

CORPORATE NAME

Enclosed are an original and one (1) copy of the restated articles of incorporation and a check for:

☒ \$35.00      ☐ \$43.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$43.75      ☐ \$52.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

FROM: Nanette O'Donnell

Name (Printed or typed)

2520 Coral Way Suite 2099

Address

Miami, FL 33145

City, State & Zip

305 607 3298

Daytime Telephone number

nanette@miamihealthlaw.com

E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the document.**

## RESTATED ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S. (Not for Profit)

### ARTICLE I NAME

The name of the corporation is: United Home Care Services, Inc.

### ARTICLE II RESTATED ARTICLES

The text of the Restated Articles is as follows: The Corporation shall have no members. The Corporation shall be managed by a Board of Directors, all of whom shall be residents of South Florida. The Corporation is formed solely for charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code. Specifically, the purpose of the Corporation is to provide comprehensive home and community based social and other services for residents of areas where the Corporation is licensed to provide such services. The monies and property of the Corporation are irrevocably dedicated to charitable purposes and upon liquidation and dissolution of the Corporation, after providing for the debts and obligations thereof, the remaining assets will not inure to the benefit of any private person, but will be distributed to a tax-exempt, non-profit corporation which is organized and operated exclusively for charitable purposes and which is tax-exempt under Section 501(c)(3) of the Internal Revenue Code. The directors are elected as provided for in the Bylaws of the Corporation. The principal place of business of the Corporation is 8400 NW 33rd Street, Suite 400, Miami, FL 33122

### ARTICLE III OFFICERS AND/OR DIRECTORS (optional)

**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:**

☒ Change                      PT        John Doe

☒ Remove                      V        Mike Jones

☒ Add                              SV        Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____

FILED  
MAR 12 2012  
PH 12:26  
CLERK OF COURT  
JULIA A. HARRIS  
CLERK

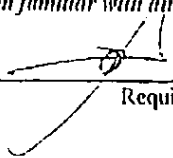
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Carlos L. Martinez, President & CEO

Address: 8400 N.W. 33 Street, Suite 400

Miami, Florida 33122

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Required Signature/Registered Agent

January 28, 2021  
Date

**ARTICLE VI ARTICLE CONSOLIDATION**

These adopted restated articles of incorporation supersede the original articles of incorporation and all amendments to them.

**ARTICLE VII REQUIRED ADOPTION INFORMATION**

Adoption of Amendment(s) (CHECK ONE)

☐ These restated articles of incorporation contain an amendment to the articles of incorporation which required member approval. The date of adoption of the amendments was \_\_\_\_\_, and the votes cast were sufficient for approval

☒ These restated articles of incorporation were adopted by the board of directors.

ARTICLE VIII EFFECTIVE DATE:

January 21, 2021

Effective date, if other than the date of filing: (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

Dated: January 28, 2021

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)

Carlos Martinez

(Typed or printed name of person signing)

President

(Title of person signing)