

# F13000003354

\_\_\_\_\_  
(Requestor's Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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SEP 11 2015  
T CANNON

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Worksite Benefits, Inc.

Name of Corporation

**DOCUMENT NUMBER:** F13000003354

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christy Fortenberry

Name of Contact Person

Homeland HealthCare, Inc.

Firm/Company

825 Market Street, Suite 300

Address

Allen, Texas 75013

City/State and Zip Code

christy.fortenberry@homelandhealthcare.com

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

For further information concerning this matter, please call:

Christy Fortenberry

at ( 469 ) 324-5242

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:



\$35.00 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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO**  
**APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**  
(Pursuant to s. 607.1504, F.S.)

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

F13000003354

\_\_\_\_\_  
(Document number of corporation (if known))

Worksite Benefits, Inc.

1. \_\_\_\_\_  
(Name of corporation as it appears on the records of the Department of State)

Georgia

2. \_\_\_\_\_  
(Incorporated under laws of)

8/16/2013

3. \_\_\_\_\_  
(Date authorized to do business in Florida)

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 SEP - 8 PM 2013

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 7/31/2015

5. Homeland@Work, Inc.  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

\_\_\_\_\_  
(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

n/a  
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

n/a  
(New jurisdiction)

8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.



\_\_\_\_\_  
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Reba J. Leonard

\_\_\_\_\_  
(Typed or printed name of person signing)

Secretary

\_\_\_\_\_  
(Title of person signing)

# STATE OF GEORGIA

Secretary of State  
Corporations Division  
313 West Tower  
2 Martin Luther King, Jr. Dr.  
Atlanta, Georgia 30334-1530

## CERTIFICATE OF AMENDMENT

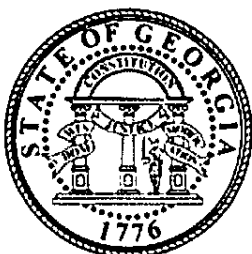
I, Brian P. Kemp, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

**HOMELAND@WORK, INC.**

a Domestic Profit Corporation

has filed articles/certificate of amendment in the Office of the Secretary of State on 05/01/2015 and has paid the required fees as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said articles/certificate of amendment.

WITNESS my hand and official seal in the City of Atlanta  
and the State of Georgia on 7/31/2015



A handwritten signature in black ink, appearing to read 'B. P. Kemp'.

Brian P. Kemp  
Secretary of State



Brian P. Kemp  
Secretary of State

OFFICE OF SECRETARY OF STATE  
CORPORATIONS DIVISION  
2 Martin Luther King Jr. Dr. SE  
Suite 313 West Tower  
Atlanta, Georgia 30334  
(404) 656-2817  
sos.georgia.gov/corporations

## Articles of Amendment of Articles of Incorporation

### Article One

The name of the corporation ("corporation") is:

Worksite Benefits, Inc.

### Article Two

The corporation hereby adopts the following amendment to change the name of the corporation. The new name of the corporation is:

Homeland@work, Inc.

### Article Three

The amendment was duly adopted by the following method (choose one statement only):

- The amendment was adopted by the incorporators prior to the issuance of shares.
- The amendment was adopted by a sufficient vote of the shareholders.
- The amendment was adopted by the board of directors without shareholder action as shareholder action was not required.

### Article Four

The date of the adoption of the amendment was: April 28, 2015

### Article Five

The undersigned does hereby certify that a request for publication of a notice of the filing of articles of amendment to change the corporation's name along with the publication fee of \$40.00 has been forwarded to the legal organ of the county of the registered office as required by O.C.G.A. §14-2-1006.1.

### Article Six

*(Check, and if applicable complete, one of the following)*

- The articles of amendment shall be effective upon the filing with the Secretary of State.
- The articles of amendment shall be effective on: \_\_\_\_\_ at \_\_\_\_\_  
(Date) (Time)

IN WITNESS WHEREOF, the undersigned has executed these Articles of Amendment on  
May 1, 2015

(Date)

RECEIVED

MAY 04 2015

Signature

Reba J. Leonard

Print Name

SECRETARY OF STATE  
Capacity (choose one option only):  Chairperson  Officer  Court-Appointed Fiduciary  Attorney In Fact

Email Address: reba.leonard@homelandhealthcare.com