no1000001205

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SECRETARY OF STATE

JUL 16 2019 T. LETMEUX 4

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION:	UP HOME CORPOR	RATION	
DOCUMENT NUMBER	N01000001205			
The enclosed Articles of	Amendment and fee are s	ubmitted for filing.		
Please return all correspon	ndence concerning this m	ntter to the following:	<u> </u>	
Michelle Austin Pamies				
		(Name of Contact	Person)	
Austin Pamies Norris Wee	eks			
		(Firm/ Compa	ny)	
401 NW 7th Avenue				
	<u> </u>	(Address)		
Fort Lauderdale, FL 3331	1			
		(City/ State and Zip	Code)	
maustin@apnwlaw.com				
	E-mail address: (to be use	d for future annual re	port notificatio	n)
For further information con	cerning this matter, please	e call:		
Michelle Austin Pamies		al	954	768-9770
	(Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the t	following amount made pa	ayable to the Florida	Department of	State:
屋 \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	C Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing A	ddress	Str	eet Address	

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ESTHER'S GROUP HOME CORPORATION

TOMIS CORTORATION					
(Name of Corporation	as currently file	d with the Florid	la Dept. of State)		
1401000001205					
(Docum	ent Number of C	orporation (if kno	OVYII)		
Pursuant to the provisions of section 617.1006, Flori amendment(s) to its Articles of Incorporation:	ida Statutes, this	Florida Not For .	Profit Corporation	adopts the fo	llowing
A. If amending name, enter the new name of the	corporation;				
name must be distinguishable and contain the word Company" or "Co." may not be used in the name.	"corporation" o	· "Incorporated"	or the abbreviation	"Corp." or	he new "Inc."
3. Enter new principal office address, if applicable Principal office address MUST BE A STREET AD	le: DRESS)				
					 .
. <u>Enter new mailing address, if applicable;</u> (Mailing address <u>MAY BE A POST OFFICE R</u> Ç	2 <u>X</u>)				,
•	 -				
Ye amazalla a da a da a da a da a da a da a d					
If amending the registered agent and/or register new registered agent and/or the new registered	red office addre office address:	ss in Florida, ent	er the name of the		
Name of New Registered Agent:					
		(Planta	street address)		
New Registered Office Address:		(1.64106	sireet aaaress)		
	(0): 1				•••••
	(City)		(Zip Co	ode) +	
w Registered Agent's Signature, if changing Regi creby accept the appointment as registered agent. I	stered Agent: ' am familiar witt	and accept the o	bligations of the po	Sillon. JUL	
		· · · · · · · · · · · · · · · · · · ·			
	Signature o	New Registered	Agent, if changing .		
	Page 1 of	.			

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 X Remove X Add	<u>∨</u> <u>M</u> i	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	ST	ESTHER DELVA	100 KINGS POINT DRIVE #907
X Add			SUNNY ISLES, FL 33160
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary	y. (Be specific)				
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		<u>.</u>			

Til dal	ie date of each amendment(s) adoption: le dits document was signed.	APRIL 14, 2018	if other than the
En	fective date if applicable:		
	()	to more than 90 days after amendment file date)	
<u>No</u> doc	<u>te:</u> If the date inserted in this block does amount's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be of State's records.	listed as the
Adı	option of Amendment(s)	CHECK ONE)	
	The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)	
	There are no members or members entitle adopted by the board of directors.	led to vote on the amendment(s). The amendment(s) was/were	
	Dated APRIL 14, 2018		
	Signature Marketin	han I	
	mile not pech zeleciée	ce chairman of the board, president or other officer-if directors i, by an incorporator — if in the hands of a receiver, trustee, or fiduciary by that fiduciary)	
-	MYRIAM FRAZII		
		(Typed or printed name of person signing)	
	President		
		(Title of person signing)	