## N/10000004132

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(Add	ress)	
(Ada	dress)	
(Auc	11033)	
(City	//State/Zip/Phone	: #)
☐ PICK-UP	☐ WAIT	☐ MAIL
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(Bus	siness Entity Nam	ne)
(Dod	cument Number)	
Certified Copies	Certificates	of Status
	, Johanna Los	
Special Instructions to F	iling Officer:	Ì
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Office Use Only



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APR 2.5 2012 T. ROBERTS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: ANDERS	SON CARE,	INC.
DOCUMENT NUMBER: N11000004		
The enclosed Articles of Amendment and fee are sub		
Please return all correspondence concerning this matt	ter to the following:	
Philomena Anderson		
	(Name of Contact Perso	n)
Anderson Care Inc.		
	(Firm/ Company)	
3366 Misty Pond Ct.		
	(Address)	
Tarpon Springs, FL 346	88	
	(City/ State and Zip Cod	e)
css4dd@hotmail.		
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
Philomena Anderson	<sub>at (</sub> 727	326-7103
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Depa	ertment of State:
□ \$35 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	Amend Divisio Clifton	Address ment Section n of Corporations Building

Tallahassee, FL 32301

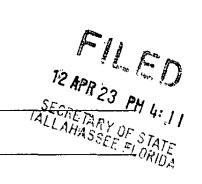
## Articles of Amendment to Articles of Incorporation of

## ANDERSON CARE INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N11000004132

(Document Number of Corporation (if known)



Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corpora  N/A	The nex
name must be distinguishable and contain the word "corpore" (Company" or "Co." may not be used in the name.	ation" or "incorporated" or the abbreviation "Corp." or "Inc.
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered off	ice address in Florida, enter the name of the
new registered agent and/or the new registered office	address:
Name of New Registered Agent: N/A	
New Registered Office Address:	(Florida street address)
	, Florida
(City,	(Zip Code)
New Registered Agent's Signature, if changing Registered learned the Agent hereby accept the appointment as registered agent. I am for the second second in the second sec	
Signature of New Regi	stered Agent, if changing

Page 1 of 4

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 Doe	
X Remove	¥	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<del></del>	NA	
2) Change Add Remove			
3) Change Add Remove	•••		
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove	<u></u>		

E. If amending or adding additional Articles, enter change(s) here: A PLEASE Add to Processary). (Be specific)	on A
Said organization is organized exclusively for charitable, religious,	
educational, and scientific purposes, including, for such purposes,	
the making of distributions to organizations that qualify as exempt	
organizations under section 501(c)(3) of the Internal Revenue Code,	
or corresponding section of any future federal tax code.	
Upon the dissolution of the organization, assets shall be distributed	
for one or more exempt purposes within the meaning of section	
501(c)(3) of the Internal Revenue Code, or corresponding section	
of any future federal tax code, or shall be distributed to the federal	
government, or to a state or local government, for a public purpose.	
Any such assets not disposed of shall be disposed of by a Court of	
Competent Jurisdiction of the county in which the principal office of	
the organization is then located, exclusively for such purposes or	
to such organization or organizations, as said Court shall determine,	
which are organized and operated exclusively for such purposes.	

The	date of each amendment(s) adoption: 04/16/2012
Effe	ective date if applicable: 04/17/2012
	(no more than 90 days after amendment file date)
Ada	option of Amendment(s) (CHECK ONE)
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Dated 04/16/2012
	Signature DA de S
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Philomena Anderson
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of nerson signing)