N130000042166

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C. LEWIS AUG 2 3 2013 EXAMMER

COVER LETTER

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TO: Amendment Section A. Division of Corporations

NAME OF CORPORATION:	DayStar I	amily Serv	ices, Inc.	
DOCUMENT NUMBER: N	13000004	266		
The enclosed Articles of Amenda	ment and fee are sub-	mitted for filing.		
Please return all correspondence	concerning this matte	er to the following:		
Esther R. Haye	es-Watler			
		(Name of Contact Person	n)	
DayStar Family	y Services	s, Inc.		
(Firm/ Company)				
655 E. Rosewo	ood Lane			
		(Address)		
Tavares, FL 32	2778			
		(City/ State and Zip Cod	e)	
daystarf	familyserv	ricesinc@ya	hoo.com	
		for future annual report		
For further information concerni	ng this matter, please	call:		
Esther Hayes-	Watler	_{at (} 352	396-4639 ode & Daytime Telephone Number	
(Name of Contac	t Person)	(Area C	ode & Daytime Telephone Number	
Enclosed is a check for the follow	wing amount made p	ayable to the Florida Depa	artment of State:	
-	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Addr			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

FILED

DayStar Family Services, Inc.

13 AUG 21 PH 2: 55

(Name of Corporation as currently filed with the Florida Dept. of State) N1300004266

SECRETARY OF STATE TALLAHASSEE, FLORIDA

(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:

N/A		The nev
name must be distinguishable and contain the word "c "Company" or "Co," may not be used in the name.	corporation" or "incorporated" or the abbrevi	ation "Corp." or "Inc.
B. Enter new principal office address, if applicable	N/A	
(Principal office address <u>MUST BE A STREET ADD</u>		
	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	N/A	
(Maining 4444) 030 (Maining 1974)	N/A	
	N/A	
D. If amending the registered agent and/or register new registered agent and/or the new registered		of the
Name of New Registered Agent: N/A		
N/A		
New Registered Office Address:	(Florida street address)	
N/A	, Florida 1	V/A
	(City)	(Zip Code)

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.

Example: X Change X Remove X Add	<u>V</u> <u>Mik</u>	L Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	Taisha Adams	655 E. Rosewood Ln Tavares, Fl 32778
Add X Remove			
2) Change	CFO	Devin Hayes	655 E. Rosewood Ln
Add			Tavares, Fl 32778
Remove 3) X Change	P/CEO.	Esther Watler	655 E. Rosewood Ln
Add			Tavares, FI 32778
Remove			
4) Change			
Add			
5) Change			
Add			
Remove			
6) Change			
Add			
Damoua			•

E. If amending or adding additional Article (attach additional sheets, if necessary).	(Be specific)
N/A	
N/A	
N/A	
	· ·
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Γhe	date of each amendment	(s) adoption: N/A		, if other than the
iate	this document was signed	N/A	FILED	
Effective date <u>if applicable</u> :				
		(no more than 90 days after ame	ndment file date AUG 21 PM 2: 55	
Ada	option of Amendment(s)	(CHECK ONE)	SECRETARY OF STATE TAULAHASSEE, FLORIDA	4
	The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number proval.	of votes cast for the amendment(s)	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(lirectors.	s). The amendment(s) was/were	
	Dated 08/	14/2013		
	Signature	they Haws - Atter		
	have t	chairman or vice of airman of the board, pre- not been selected, by an incorporator – if in the court appointed fiduciary by that fiduciary)		
	Esther	R. Hayes - Watler		
		(Typed or printed name of person sign	ing)	
	Preside	ent/C.E.O		
		(Title of person signing)		