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SECRETARY OF STATE
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Amend + N/C

TB 7/8/08

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION: Precision Nu	ursing Care Inc.	
DOCUMENT NU	MBER: 65-1114930		
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
Edv	vard H.Baird		
	(Name	of Contact Person)	
Pre	ecision Nursing Care, Inc	•	
	(Fir	rm/ Company)	
300	1 S. Ocean Drive #913	-E	
-		(Address)	
НОІ	LLYWOOD, FL. 33019		
	(City/S	tate and Zip Code)	
For further inform	ation concerning this matter,	please call:	
Edward H.Baird		at (_954) 920-97	
(Nam	e of Contact Person)	(Area Code & Daytim	e Telephone Number)
Enclosed is a chec	k for the following amount:		
□\$35 Filing Fee	✓ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Statu Certified Copy (Additional Copy is enclosed)
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

F- 2008 Ju	MED
TALLAHASSE	PM 3: 17 YOF STATE E. FLORIDA
•	LORIDA

Precision Nursing Care, Inc.

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

65-1114930
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> dopts the following amendment(s) to its Articles of Incorporation:
EW CORPORATE NAME (if changing):
Precision Care Staffing Pool, Inc.
Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A."
MENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
All addresses changed to 3001 5. Ocea Drive #913-E, Hollywood, FL 33019
(Attach additional pages if necessary)
f an amendment provides for exchange, reclassification, or cancellation of issued shares, provision implementing the amendment if not contained in the amendment itself: (if not applicable, indicate
N/A

(continued)

The date of each amendment(s) adoption: 6/25/08
Effective date if applicable: 6/25/08
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval by
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signature Signature South (PRES)
(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)
Edward H.Baird
(Typed or printed name of person signing)
President
(Tide of amon signing)

FILING FEE: \$35