## P02000095899

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## TRANSMITTAL LETTER

**TO:** Amendment Section Division of Corporations

SUBJECT:	NAME CHANGE	- NEW LIFE ADULT HO	ME CARE, INC (old name)
DOCUMENT NU	mber: <u>P020000</u>	095899	· · · · · · · · · · · · · · · · · · ·
The enclosed Artic	les of Amendment and fee ar	e submitted for filing.	
Please return all co	rrespondence concerning this	matter to the following:	
	ROSALINE SEABR (Nam	OOK ne of Person)	
	NEW LIFE ADULT HO	ME CARE INC Firm/ Company)	
_3	22 REGAL PARK	DR Address)	**************************************
<i>i</i> V	ALRICO FL 33594 (City/Sta	te/ and Zip Code)	······································
For further informa	tion concerning this matter, p	please call:	
ROSALINE	SEARROCK (Name of Person)	at (8/3 ) 677.90 (Area Code & Daytime 1	933 Felephone Number)
Enclosed is a check	for the following amount:		
☐ \$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 Ad Amendmen Division of P.O. Box 63 Tallahassee	t Section Corporations 327	Street Address Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399	

## Articles of Amendment to Articles of Incorporation of

NEW LIFE ADULT HOME CARE INC	
(Name of corporation as currently filed with the Florida Dept. of State)	
Pozooo 95899 (Document number of corporation (if known)	
(Document number of corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:	
NEW CORPORATE NAME (if changing):	
NEW LIFE ADULT CARE IL, INC (must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")	
(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")	
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	)
and of Afficie fine(s) being afficilited, added of defered. (BE SPECIFIC)	
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(Attach additional pages if necessary)	
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisio for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate I	
(continued)	

The date of each amendment(s) adoption: $3/6/2004$
Effective date if applicable: 3/10/2004  (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.
Signed this 26 day of March , 2004.
Signature Alaly Pres, dent  (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)
Rosaline Seabrook (Typed or printed name of person signing)
President (Title of person signing)

**FILING FEE: \$35**