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BASIC AMENDMENT

SUNCOAST WAIVER SUPPORT SERVICES, INC.

Certificate of Status	0
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ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION

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SECRETARY OF STATE
ALLAHASSEF FLORIDA

SUNCOAST WAIVER SUPPORT SERVICES, INC.

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:

First Amendment:

ARTICLE 1 Name

The name of this Corporation is:

SUNCOAST SUPPORT, INC.

Second Amendment:

ARTICLE 3

Registered Office and Agent

The street address of the registered office of this Corporation is:

5006 TROUBLE CREEK ROAD SUITE 101 **NEW PORT RICHEY, FL 34652**

and the name of its registered agent at such address is:

SHARON KELLY

Third Amendment:

ARTICLE 4

Principal Office

The mailing address and street address of the Corporation are:

5006 TROUBLE CREEK ROAD SUITE 101 **NEW PORT RICHEY, FL 3465**

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Fourth Amendment:

ARTICLE 6 Board of Directors

This Corporation shall have One director(s). The number of directors may be either increased or diminished from time to time by the Bylaws, but shall never be less than one (1). The name and address of the directors of this Corporation is:

Name and Address SHARON KELLY, PRESIDENT/VICE PRESIDEN/SECRETARY 5006 TROUBLE CREEK ROAD SUITE 101 NEW PORT RICHEY, FL 34652

The Adoption of Amendment(s) was/were adopted by the board of directors on January 20, 2004 without shareholder action and shareholder action was not required.

Signed on January 20, 2004.

Signature¹

SHARON KELLY, PRESIDENT/DIRECTOR

¹This form was prepared with the assistance of CourtAccess Centers of America Inc., a non-lawyer located at 3249 W Cypress St., Suite C, Tampa, FL 33607, 813-875-1333.

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ACCEPTANCE BY REGISTERED AGENT

Having been named as Registered Agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date: January 20, 2004

SHARON KELLY

This form was prepared with the assistance of CourtAccess Centers of America, Inc., a non-lawyer located at 3249 W Cypress St., Suite C. Tampa, FL 33607, (813)-875-1333.