P03000007889

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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FILED
08 AUG -4 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend
8/4 8

"*Providing full range of services for persons with disabilities*" INTEGRATED HABILITATION SERVICES INC

July 31, 2008

Suzanne Payne
Amendment Dept. c/o Division of Corporation
Clifton Building
2661 Executive Center
Tallahassee, Fl 32301

RE: P03000007889
Integrated Habilitation Services, Inc

Dear Ms. Payne

Per my conversation with Thelma, she was going to be on vacation the week of 8/4-8/8/08. She advised me to direct this matter to your attention.

Please note that on 6/12/08 we amended the articles to reflect the true and correct corporate resolution. Harry Quinlan is not an employee or a share holder of this company. He is the temporary personal representative assigned to the trust of the decease. The assigned shares of the company belong to the deceased son who is minor.

The amendment filed on 7/29/08 was in error. Please place a note on the file if possible to reflect that prior to make any changes on these articles they are to contact Ella Mayo at 305-218-6811 or 305-245-4555.

I thank you in advance for your immediate attention. Should you have any questions please feel free ton contact me directly at any of the numbers listed above.

Respectfully,

Ella Mayo
Vice President

305 South Flagler Ave Homestead, FL. 33030
Tel. 305.245.4555 • Fax. 305.245.4599

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Integrated Habilitation Services, Inc

DOCUMENT NUMBER: P03000007889

The enclosed ***Articles of Amendment*** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ella Mayo
(Name of Contact Person)

Integrated Habilitation Services, Inc
(Firm/ Company)

305 S. Flagler Ave
(Address)

Homestead, Fl 33030
(City/ State and Zip Code)

For further information concerning this matter, please call:

Ella Mayo (Name of Contact Person) at (305) 218-6811 (Area Code & Daytime Telephone 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 Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED

08 AUG -4 PM 12: 44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

Integrated Habilitation Services, Inc
(Name of corporation as currently filed with the Florida Dept. of State)

P03000007889
(Document number of corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this ***Florida Profit Corporation*** adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

___

(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.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

Remove Harry Quinlan as President

Ella Mayo remains Vice President

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: 3/26/08

Effective date if applicable: 3/26/08
(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 Ella Mayo
(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)

Ella Mayo
(Typed or printed name of person signing)

Vice President
(Title of person signing)

FILING FEE: $35