P0300011108

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: My Comple	ete Care, Inc.		
DOCUMENT NUMB	_{ER:} P0300007116	8		
	of Amendment and fee are su			
Please return all corresp	oondence concerning this ma	tter to the following:		
	Edgar Arvelo			
<u>-</u>		Name of Contact Person	1	
ļ	My Complete Ca	re, Inc.		
<u></u>		Firm/ Company		
;	571604 Arbor Clu	ub Way		
_		Address		_
	Boca Raton, FL 3	33433		
_		City/ State and Zip Cod	2	-
con	ijoo@myoomplot	acara cam		
Serv	vice@mycompleto	sed for future annual report	notification	
	L-man address. (to be us	sed for future aimuai report	notifications	
. For further information	concerning this matter, pleas	se call:		
Edgar Arvelo		at (954	333-9595	
	f Contact Person)	er
rame of	Comact I crson	Alça Co	de & Daytime Telephone Numb	
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:	
\$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)	
	ng Address		Address	
Amendment Section		Amendment Section		
	ion of Corporations	Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle		
i ananassee, FL 32314		Tallahassee, FL 32301		

Articles of Amendment to Articles of Incorporation of

My Complete Care, Inc.	
(Name of Corporation as currently filed with the Florida Dept. of St	ate)
P03000071168	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Con</i> its Articles of Incorporation:	rporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professio word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
-1	12 Privis
	12 PR -2
D. If amending the registered agent and/or registered office address in Florida, en new registered agent and/or the new registered office address:	ter the name of the
Name of New Registered Agent	H 9:
(Florida street address)	
	· · ·
New Registered Office Address: (City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the	obligations of the position.
Signature of New Registered Agent, if changing	**************************************

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 <math>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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove	**************************************		
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove	 		
5) Change Add Remove	- 46-5-6-6-4-4-6-0-4-4-6		
6) Change Add Remove			

E. If amending or adding additional Article (attach additional sheets, if necessary).	(Be specific)
ticle 4 of the articles of Incorporation be amended to read a	as follows: The number of shares the company is authorized to issue is 4,000,000 of common stock.
——————————————————————————————————————	
	
If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
· · · · · · · · · · · · · · · · · · ·	
	·

The date of each amendment(s)	adoption: 3-28-2012
	3-28-2012
<u></u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	
	(voting group)
action was not required. The amendment(s) was/were a	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
action was not required.	2042
_{Dated} 3-28-	2012
Signature	Talam mult
(By a	director president or other officer - if directors or officers have not been
selec	ted, by an incorporator – if in the hands of a receiver, trustee, or other court
appo	inted fiduciary by that fiduciary)
	Edgar Arvelo
	(Typed or printed name of person signing)
	President
	(Title of person signing)