(Re	questor's Name)	
(Ad	dress)	·
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT .	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

ON		RATION: SARACAR BER: P0300007470	NAME OF CORPOR	
	omitted for filing.	of Amendment and fee are su	The enclosed Articles	
	ter to the following:	spondence concerning this ma	Please return all corres	
		JAMES J LETKO		
n	Name of Contact Persor			
	Firm/ Company	<del></del>		
		11 DUKE CT		
	Address 08867	PITTSTOWN, N.		
le	City/ State and Zip Code			
	AIL.COM	MESLETKO@GM	JAI	
notification)	ed for future annual report			
	e call:	n concerning this matter, plea	For further information	
, 797-1042	at ( 908	TKO	JAMES J LE	
ode & Daytime Telephone Number		Name of Contact Person		
artment of State:	payable to the Florida Depa	r the following amount made	Enclosed is a check fo	
Certificate of Status Certified Copy (Additional Copy is enclosed)	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$43.75 Filing Fee & Certificate of Status	□ \$35 Filing Fee	
Address dment Section on of Corporations n Building Executive Center Circle	Amend Division Clifton 2661 E	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
797-1042 Dede & Daytime Telephone Note artment of State:  \$\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)  **Address** dment Section on of Corporations in Building	Address  08867  City/ State and Zip Code  AIL.COM  ed for future annual report  e call:  at (908  Area Co  payable to the Florida Depayable to the Florida Depayable Certified Copy (Additional copy is enclosed)  Street  Amend Division Clifton 2661 E	PITTSTOWN, N.  MESLETKO@GM E-mail address: (to be used to be used	For further information  JAMES J LE  Name of the control of the co	

## Articles of Amendment to Articles of Incorporation of

	of			
SARACARE CORPORA	TION			
* · · ·	currently filed with the Florid	a Dept. of State)		
P03000074708				
(Documen	nt Number of Corporation (if kno	wn)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this <i>Flori</i>	da Profit Corporation a	dopts the following	amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "Co".	A professional corpora	orated" or the ab	breviation
B. Enter new principal office address, (Principal office address MUST BE A S				NASION OF
C. Enter new mailing address, if applia				S PH 1: 40
D. If amending the registered agent an new registered agent and/or the new		n Florida, enter the na	me of the	
Name of New Registered Agent	JAMES J LETKO		=	
	6600 NW 16TH ST	SUITE 6		
	(Florida street aa	····	-	
New Registered Office Address:	PLANTATION	, Florida	33313	
	(City)		(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agent:			

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. Lam 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.

X Change	PT John	Doe	
X Remove	V Mike	e Jones	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PTDS	JAMES J LETKO	11 DUKE CT
X			PITTSTOWN, NJ 08867
Remove			
2) Change	CFO	JOSEPH SAFINA	6600 NW 16TH ST
Add	<u> </u>		SUITE 6
X Remove			PLANTATION, FL 33313
3) Change	С	DANE MEYER	6600 NW 16TH ST
Add	<del></del>		SUITE 6
X Remove			PLANTATION, FL 33313
4) Change	v Odrovic de Santonov v vondrinde		
Add			
Remove			***************************************
5) Change			
Add			<del></del>
Remove			
6) Change			**************************************
Add			
Remove			

(Attach addition	nal sheets	, if necessary).	ticles, enter cha (Be specific)						
RTICLE \					officers	as li	sted o	on pag	e 2
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. <u>If an amendm</u>									
			<u>iendment if not</u>	contair	ned in the a	<u>mendme</u>	nt itself:		
	plicable,	indicate N/A)							
V/A									
		<del> </del>	<del>,,,</del>						
					·				
	<del> </del>								
				<u> </u>					

The date of each amendment(s) adoption: January 2, 2013
Effective date if applicable: January 2, 2013
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted 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)
(voining 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.
Dated January 2, 2013
Signature De Med
(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)
DREW MEYER
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)