# P03000130026

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ALLANASSEE, FLORIDA

# TRANSMITTAL LETTER

TRANSMIT  TO: Amendment Section Division of Corporations  SUBJECT: Amendment   Change  BOCUMENT NUMBER: 10 3000/30  The enclosed Articles of Amendment and fee are selected to the concerning this necessary.	<u>TAL LETTER</u>	ON TOOK 28 PH. W.	
SUBJECT: Anendment Khunge	of Corpo	ration Nome	
DOCUMENT NUMBER: <u>PO 3000/30</u>	0026		
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this matter to the following:			
MICHAEL S. Mame	of Person)		
Access America. (Name of F	irm/ Company)	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
141 NW 20th Street	et, Suite G ddress)	104	
Boca Raton, FZ	COKIDA 334 and Zip Code)	31	
For further information concerning this matter, ple	ease call:		
Michael S. Richards (Name of Person)	at ( <u>561</u> ) <u>483</u> (Area Code & Daytin	- 7700 ne 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)	
	6		

### **Mailing Address**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## Street Address

Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

# Articles of Amendment to Articles of Incorporation of

Access Americane Nursing Pharmacy & Health Services, Inc. (Name of corporation as currently filed with the Florida Dept. of State)
(Name of corporation as currently filed with the Florida Dept. of State)
fO 3000130026 (Document number of corporation (if known)
(Document number of corporation (it 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):
Access Americane Health Services Inc.
(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)
Hiticle 1 - Name
That the Name of the Corporation,
Access Americane Nursing Pharmay & Health
Services, INC." be changed to
That the Name of the Corporation,  "Access Americane Nursing, Pharmany & Health  Services, Inc." be changed to  "Access Americane Health Services Inc.
ALLA ALLA
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ا مر کین از مر کین
(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: 4 · 24 · 04
Effective date if applicable: 4 o 24 o 04  (no more than 90 days after amendment file date)
(no more than 90 days after amendment file date)
Adoption of Amendment(s) ( <u>CHECK ONE</u> )
☐ The amendment(s) was/were approved by the shareholders. The number of votes cast fo 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 an shareholder action was not required.
Signed this 24 <sup>th</sup> day of April 2004.  Signature Culcury
Signature  (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)
MICHAEL S. AICHARDS (Typed or printed name of person signing)
President (Title of person signing)
(Title of person signing)

FILING FEE: \$35