

FROM: LAZARUS
visi, of Corporations

FAX NO. 257 440

Jun. 17, 2008 10:57AM P1

04000140702

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H08000153028 3)))



H080001530283ABC.

RECEIVED

2008 JUN 17 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations
Fax Number : (850) 617-6380

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I200000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 JUN 17 PM 3:25

FILED

COR AMND/RESTATE/CORRECT OR O/D RESIGN

NEW LIFE HOME HEALTHCARE INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

6/16/2008 4:48 PM

TB

6/17/08

FROM : LAZARUS
850-617-6381

FAX NO. : 3052201440

Jun. 17 2008 10:57AM P2

6/17/2008 10:24 PAGE 001/001 Florida Dept of State



June 17, 2008

FLORIDA DEPARTMENT OF STATE

Division of Corporations

NEW LIFE HOME HEALTHCARE INC.
13155 SW 42 STREET
104
MIAMI, FL 33175

SUBJECT: NEW LIFE HOME HEALTHCARE INC.
REF: P04000140702

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct our document accordingly.

I am not sure if the month on the date of adoption is June or August. It should be June.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Meresa Brown
Regulatory Specialist II

FAX Ref. #: H08000153028
Letter Number: 908A00036817

H08000153028

Articles of Amendment
to
Articles of Incorporation
of

New Life Home HealthCARE Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

P04000140702

(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)**

Article V- Registered Agent

Berto Javier Arias- 13155 S.W. 42nd Street, Suite 104, Miami, FL 33175

Article VII- Officers and Directors

Berto Javier Arias- President, Secretary, Treasurer & Director13155 S.W. 42nd Street, Suite 104, Miami, FL 33175

(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)

H08000153028

FILED
2008 JUN 17 PM 3:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H08000153028

The date of each amendment(s) adoption: 6-16-08Effective date if applicable:
(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 BERTO J. ARIAS
(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)

Berto Javier Arias
(Typed or printed name of person signing)

President
(Title of person signing)

FILING FEE: \$35

H08000153028

FROM : LAZARUS

FAX NO. : 3052201440

Jun. 17 2008 10:58AM P5

H08000153028

**Certificate of Designation
Registered Agent/ Registered Office**

Having been named as Registered Agent and to accept service of process for the above stated corporation at the place designated in the Articles of Incorporation, I hereby accept the appointment as registered 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.

BERTO J. ARIAS
Registered Agent Signature

H08000153028