

P05000011188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

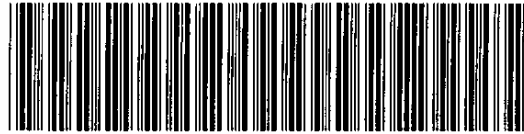
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700112322807

11/21/07--01020--002 \*\*43.75

FILED

07 NOV 21 AM 10:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Amended  
XCVS  
11-21-07  
CVR-28

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** ANICETO HEALTH CARE INC.

**DOCUMENT NUMBER:** P0 50000 11188

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

Please return all correspondence concerning this matter to the following:

KATHLEEN ROOT  
(Name of Contact Person)

ANICETO HEALTH CARE INC.  
(Firm/ Company)

14270 SW 68 ST  
(Address)

MIAMI FL 33183  
(City/ State and Zip Code)

For further information concerning this matter, please call:

KATHLEEN ROOT at ( 305 ) 3871533  
(Name of Contact Person) (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

Articles of Amendment  
to  
Articles of Incorporation  
of

ANICETO HEALTH CARE INC.

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

PD 50000 III 88

(Document number of corporation (if known))

FILED  
07 NOV 21 AM 10:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 VII THE OFFICERS AND DIRECTORS OF THE CORPORATION ARE :

TITLE : PRESIDENT — MILAGROS F ANICETO  
15967 SW 112 PLACE  
MIAMI FL 33157 US

TITLE : VICE PRESIDENT — KATHLEEN H ROOT  
14270 SW 68 ST.  
MIAMI FL 33183 US

TITLE : SECRETARY — KATHLEEN H ROOT  
14270 SW 68 ST  
MIAMI FL 33183 US

TITLE : TREASURER — MILAGROS F. ANICETO  
15967 SW 112 PLACE  
MIAMI FL 33157 US

(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)

N/A

The date of each amendment(s) adoption: NOV. 19, 2007

Effective date if applicable: NOV. 19, 2007  
(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 Kathleen Root  
(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)

KATHLEEN ROOT  
(Typed or printed name of person signing)

VICE PRESIDENT  
(Title of person signing)

FILED  
07 NOV 21 AM 10:03  
SECRETARY OF STATE  
ALABAMA  
ALABAMA, FLORIDA

FILING FEE: \$35