P05000016620

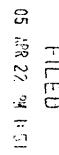
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04/01/05--01033--003 **43.75

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF COR	PORATION: Girasol	Health Services, Inc	•
DOCUMENT N	UMBER:	20	
The enclosed Art	icles of Amendment and fee at	re submitted for filing.	
Please return all c	orrespondence concerning this	s matter to the following:	
	Carmen	varte	
_	(Name o	of Contact Person)	
	Orlie	Mest	
		m/ Company)	
_6	0515W 1257 West		
	•	(Address)	
	West Mieun	FL 33144	
	(City/ Sta	ate/ and Zip Code)	
For further inform	ation concerning this matter, p	please call:	
Car	men Doorto	at (<u>305</u>) <u>305</u> 9 (Area Code & Daytime	<i>"</i> 472
(Nan	ne of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a chec	k for the following amount:		
□ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing A Amendme Division o P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations 409 E. Gaines Street	

Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 11, 2005

CARMEN DUARTE GIRASOL HEALTH SERVICES, INC. 1800 W. 49 STREET, SUITE 232 HIALEAH, FL 33012

SUBJECT: GIRASOL HEALTH SERVICES INC.

Ref. Number: P05000016620

We have received your document for GIRASOL HEALTH SERVICES INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

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

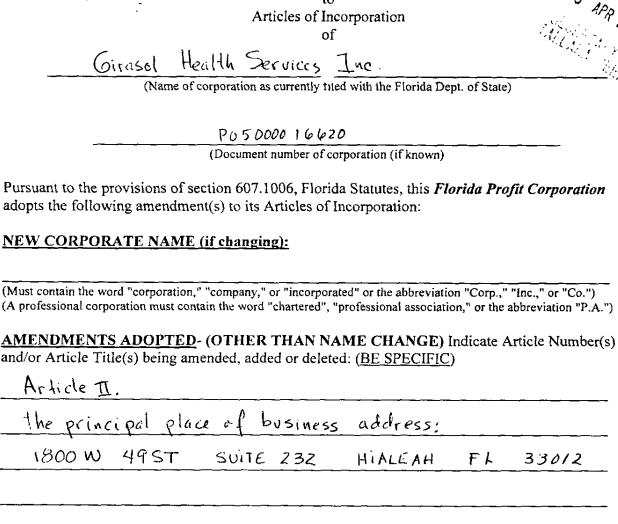
If you have any questions concerning the filing of your document, please call (850) 245-6869.

Teresa Brown Document Specialist

Letter Number: 405A00024512

DE APR 22 MIII: 2

Articles of Amendment to



(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) NIA

(continued)

The date of each amendment(s) adoption: O2/16/05			
Effective date if applicable:			
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
	was/were approved by the shareholders. The number of votes cast for y the shareholders was/were sufficient for approval.		
	was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote mendment(s):		
"The number of	votes cast for the amendment(s) was/were sufficient for approval by		
	(voting group)		
☐ The amendment(s) v and shareholder action	was/were adopted by the board of directors without shareholder action on was not required.		
The amendment(s) v shareholder action w	was/were adopted by the incorporators without shareholder action and as not required.		
Signed this 16 day of	february, 2005.		
(By a di selecte	rector, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)		
	CARMEN DUARTE		
	(Typed or printed name of person signing)		
	President		
	(Title of nerson signing)		

FILING FEE: \$35