P05000154221

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Ві	isiness Entity Nam	ne)
(Do	ocument Number)	
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07/17/12--01011--007 **35.00

EFFECTIVE DATE
8-6-12

DIVISION OF CORPORATION

12 JUL 17 PM 3:58

Amend

JUL 1 8 2012 T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: PARADISE	HOME HEALTH	H, INC.
DOCUMENT NUMB	ER: P0500015422	1	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this mat	tter to the following:	
	ELENA ALEMAN		
-		Name of Contact Person	l
<u>_</u>	PARADISE HOM	E HEALTH, INC	
		Firm/ Company	
6555 NW 36th ST. # 211			
		Address	
·	VIRGINIA GARD	ENS, FL 33166	
		City/ State and Zip Code	2
para	adisehomehealth	@yahoo.com	
<u>· </u>	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
ELENA ALEN	MAN	at (305	870-0401
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

	EFFECTIVE DA	(E
Articles of Am	endment	- DIVSECRETABLED
to Articles of Incomo	rporation	TE SECRETAFILED 12 JUL 17 PM 3:58
PARADISE HOME HEALTH, INC		PM 3:50
(Name of Corporation as currently filed with the Flo	orida Dept. of State)	
(Document Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this F_0 its Articles of Incorporation:	lorida Profit Corporation add	opts the following amendment(s)
A. If amending name, enter the new name of the corporation: NA		The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporat P.A."	ion name must contain the
B. Enter new principal office address, if applicable:	4155 SW 130 AV	/ENUE
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	STE. 114	
	MIAMI, FL. 3317	<u>′5</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	s A	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the nam	e of the
Name of New Registered Agent Name of New Registered Agent		
(Florida stree	et address)	
New Registered Office Address:	, Florida_	
(City)		(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	Sale and I am add to	of the position

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 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.

Example: X Change	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones	1/k	
X Add	<u>sv</u>	Sally Smith	2	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address
1) Change				
Add				
Remove				
2) Change	****			
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add	.,			
Remove				
- 				
6) Change				
Add				
Remove				

1/4

	nal sheets, if necessar	y). (Be specifi	ic)			
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						<u> </u>
, ,	· · · ·		,			
<u>provisions fo</u>	ent provides for an rimplementing the policable, indicate N/A	amendment if n	ssification, or c ot contained in	ancellation of iss the amendment	sued shares, itself:	
			Ŷ			
	· ————————————————————————————————————					

The date of each amendment(s)	adoption: JULY, 11 2012
Effective date <u>if applicable</u> :	UGUST 6, 2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
1	(voting group)
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated	7-11-2012 Eleca Alexan
Signature	Eleca Alexan
(By a	director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court sointed fiduciary by that fiduciary)
	Elena Aleman
	(Typed or printed name of person signing)
	Elecen Hlewan - Ceo-
	(Typed or printed name of person signing) Elected Aleucour - Ceo- (Title of person signing) Rusidan