## PD5000165447

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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03/04/13--01027--007 \*\*35.00

John James

Jerry)

## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: Innovation Home Health, Inc. DOCUMENT NUMBER: P05000165447 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Richard A. Cores Name of Contact Person Innovation Home Health, Inc. Firm/ Company 14628 SW 8 Street Address Miami, FL 33184 City/ State and Zip Code innovationhome@bellsouth.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Richard A. Cores Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **■** \$35 Filing Fee □\$52.50 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address

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

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

innovation Home Health, Inc.		•	-
(Name of Corporation as currently filed P05000165447	with the Florida Dept.	of State)	
(Document Number of Co	rporation (if known)		-
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this <i>Florida Prof</i> i	it Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new name of the corp-	oration:		
			The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the about	"Inc," or "Co". A proj	ny," or "incorporated" or the at fessional corporation name must (	
B. Enter new principal office address, if applicable:			_
(Principal office address MUST BE A STREET ADDRI	ESS)	<b>1</b> 555	
		(e	en Property
		1	. 3 :, 3≤
C. Enter new mailing address, if applicable:		• · · · · · · · · · · · · · · · · · · ·	SHAR -4 PH 2:
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>	, ,	PH 1-8
		м.	
			· · · ·
		A. 17	<del>.</del> 5
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		la, enter the name of the	
Name of New Registered Agent			
	(Florida street address)	<del></del>	
New Registered Office Address:		, Florida	
Hew Registered Office Hadress.	(City)	(Zip Code)	-
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I a		ent the obligations of the position.	
The say accept the appearance in an regime to agent. The		L	
Signature of New	Registered Agent, if chan	 เซiทช	

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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> <u>Joh</u> i	n Doe	
X Remove	<u>V</u> <u>Mik</u>	<u>se Jones</u>	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CFO	Richard A. Cores	14628 SW 8 Street
X Add			Miami, FL 33184
Remove			
2) Change	S	Jorge Hernandez	14628 SW 8 Street
X Add			Miami, FL 33184
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
· · · · · · · · · · · · · · · · · · ·		
<del></del>		
	<del></del>	
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	

The date of each antendmen	t(s) adoption: U3/U1/2U13
Effective date <u>if applicable</u> :	03/01/2013
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	re adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder action and shareholder
Dated 02/	27/2013
(I s	By a director, president or other officer $+$ if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court
a	ppointed fiduciary by that fiduci <del>ary)</del>
	Yitsy Hernandez
	(Typed or printed name of person signing)
	President
	(Title of person signing)