FROM : LAZARUS PROM : LAZARUS

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.

(((H080002809013)))



H080002809013ABC

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

To:

Division of Corporations

Fax Number : (850)6

: (850)617-6380

From:

Account Name : IAZARUS CORPORATE FILING SERVICE, INC.

Account Number: 120000000019
Phone: (305)552-5973

Fax Number : (305)220-1440

MECEIVED
2008 DEC 29 AM PSO
SECRETARY OF SIDE

FUTURE CARE SOLUTION, INC.

MND/RESTATE/CORRECT OR O/D RESIGN

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

Electronic Filing Menu

Corporate Filing Menu

Help

12/29/2008 4:37 PM

FAX NO. :3052201440

Dec. 29 2008 05: 57PM P2

H08000280901

2008 DEC 29 PM 12: 36

Articles of Amendment to Articles of Incorporation

SECRETARY OF STATE TALLAHASSEE.FLORIDA

P06000036466
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fiorlda Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable; (Malling address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the
Name of New Registered Agent: Angel Wilches? A
New Registered Office Address: New Registered Office Address: (Florida street address) MIAMIFT., Florida 33/55 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Afent! I hereby accept the appointment as registered agent. Position.

Page 1 of

istered Agent, If changing

FAX NO. :3052201440

Dec. 29 2008 05:58PM P3

H08000280901

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) <u>Name</u> Address Type of Action Add □ Remove ALC GI Add Remove E. If amending or adding additional Articles, enter change(s) hore: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an 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) Page 2 of 3

H08000280901

The date of each amendment(s) adoption:	. October 24,2008
Effective date if applicable:	an 90 days after amendment file date)
(no more m	an 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.
The amendment(s) was/were approved be must be separately provided for each vo.	y the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s):
"The number of votes cast for the ar	mendment(s) was/were sufficient for approval
by(voting group	,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder
Dated Dec. 29, 20	00
sciected, by an in	esident or one officer - if directors or officers have not been corporator in the hands of a receiver, trustee, or other court my by that fiducially)
A	NCec MUGUERZA (Typed or printed name of person signing)
	PRe Si DRALL (Title of person signing)

Page 3 of 3