# P060000 85589

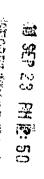
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF COR	PORATION:	AAA HOUSE DOCTOR INC.	
DOCUMENT NU	MBER:	P06000085589	
The enclosed Artic	cles of Amendment and fee	are submitted for filing.	
Please return all co	orrespondence concerning	nis matter to the following:	
		GEORGE KALIL III	
		Name of Contact Person	
	AAA	HOUSE DOCTOR INC.	
		Firm/ Company	
		11767 SW 132 PL.	
		Address	
		MIAMI, FL 33186	
		City/ State and Zip Code	
	AAAHOUSED E-mail address: (to be u	OCTOR@HOTMAIL.COM ed for future annual report notification)	
For further informa	ation concerning this matte	, please call:	
	EORGE KALIL	at (	
Name	of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check	k for the following amount	made payable to the Florida Department of State:	
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	✓ \$43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy	tus
Mailing Ac Amendmen Division of P.O. Box 6	t Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building	
Tallahassee	e, FL 32314	-2661 Executive Center Circle Tallahassee, FL 32301	

#### **Articles of Amendment** to **Articles of Incorporation** of

# AAA HOUSE DOCTOR INC.

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

## P06000085589

(Document Number of Corporation (if known)

or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation hartered," "professional association," or the abbreviation "P.A."  address, if applicable:  N/A  BE A STREET ADDRESS   s, if applicable:  A POST OFFICE BOX  N/A  agent and/or registered office address in Florida, enter the name of the or the new registered office address:	me must be distinguishable and contain the word "corporation," "company," or "incorporated" or the observiation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation must contain the word "chartered," "professional association," or the abbreviation "P.A."  Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	breviation "Corp.," "Inc.," or Co.," or me must contain the word "chartered,"  Enter new principal office address, if	ain the word "corp r the designation "C "professional associa	orp," "Inc," or ation," or the ab	"Co". A professione	rated" or th
s, if applicable: A POST OFFICE BOX   agent and/or registered office address in Florida, enter the name of the or the new registered office address:	Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent:  N/A					
s, if applicable:  A POST OFFICE BOX  N/A  agent and/or registered office address in Florida, enter the name of the or the new registered office address:	Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent:  N/A	rincipal ottice adaress MUNT BE A STI		N/A		
or the new registered office address:	Name of New Registered Agent:  N/A  N/A			N/A		
	Name of New Registered Agent: N/A					- F 4l
	New Registered Office Address: (Florida street address)				da, enter the name	of the
ddress: (Florida street address)		new registered agent and/or the new	registered office add		da, enter the name	of the
	, Florida (City) (Zip Code)	Name of New Registered Agent:	registered office add	Iress:		of the
	<u>New Registered Office Address</u> : (Florida street address)					

# 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>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>VP</u>	BARBER, ALAN J	11767 SW 132 PL MIAMI, FL 33186	☐ Add ☐ Remove
<u>T</u>	BARBER, JERRY A	11767 SW 132 PL. MIAMI, FL 33186	
VP&T	TERRI A. KALIL	11767 SW 132 PL. MIAMI, FL 33186	
(attach a	ding or adding additional Articles, additional sheets, if necessary). (Be IV: SECTION 6. Vice Presiden changed to Te	specific) t with its corresponding shar	es shall be
ARTICLE	E IV: SECTION 8. Treasurer with	n its corresponding shares sh	nall be changed to
	Terri A. Kalil		
THIS AM	ENDMENT SHALL SUPERCE	DE ALL PRIOR FILING AND	AMENDMENTS
provisi	mendment provides for an exchange ons for implementing the amendment applicable, indicate N/A)		
	·		

The date of each amendmen	t(s) adoption: SEPTEMBER 15, 2011
Effective date <u>if applicable</u> :	OCTOBER 1, 2011  OCTOBER 1, 2011
<u>н аррисаме</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	are approved by the shareholders through voting groups. The following statement and 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/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
✓ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated SEF	TEMBER 20, 2011
Signature_	Leone Kahlta
sel	r a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	GEORGE KALIL III
	(Typed or printed name of person signing)
	PRESIDENT & SECRETARY
	(Title of person signing)