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FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
09 JUN 12 PM 12:43

Roberts JUN 16 2009

2009 JUN 16 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: In-Home Care, Inc.

DOCUMENT NUMBER: 806 000 104037

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Claudette Roberts
Name of Contact Person

In-Home Care, Inc.
Firm/ Company

14566 Cherry Lake Dr. West
Address

Jacksonville, Fl. 32258
City/ State and Zip Code

Claudetter02347@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Claudette Roberts at (904) 710-5727
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|--|--|--|--|

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

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

Articles of Amendment
to
Articles of Incorporation
of

15-39

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 JUN 12 PM 12:42

IO-Home Care Inc.

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

P 06 000 104037

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* 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)

9471 Baymeadows Rd.
Suite 401
Jacksonville, Fl. 32256

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

9471 Baymeadows Rd.
Suite 401
Jacksonville, Fl. 32256

D. 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: _____

New Registered Office Address: _____
(Florida street 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 with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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>	<u>Type of Action</u>
Pres.	Claudette Roberts	14566 Cherry Lake Dr. Jacksonville, Fl. 32258	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Pres.	Thomas Roberts	9471 Baymeadows Rd Suite 401 Jacksonville, Fl. 32256	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
 (attach additional sheets, if necessary). (Be specific)

Articles IV - Shares
 1000 shares owned by Thomas Roberts
 & shares owned by Claudette Roberts

Article V - Officers
 Claudette Roberts - Remove
 President - Thomas Roberts 9471 Baymeadows Rd
 Suite 401 Jacksonville, Fl. 32256

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)

Please remove Claudette Roberts from all areas
 of the Corporation - & shares owned
not maintaining any office

The date of each amendment(s) adoption: June 11, 2009
(date of adoption is required)
Effective date if applicable: July 15, 2009
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided 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/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 6/11/09

Signature Claudette Roberts
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Claudette Roberts
(Typed or printed name of person signing)

President
(Title of person signing)