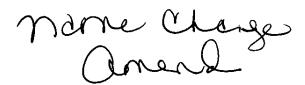
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(Re	equestor's Name)	
hA)	dress)	
(riu	41093)	
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(Cit	ty/State/Zip/Phone	e #)
. PICK-UP	. WAIT	MAIL
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(Do	ocument Number)	
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ZOOS NOV -3 PM 3: 41
SECRETARY OF STATE
ART THAS SEEF LORIO.

NOR 11/3/09

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: HELPI	NG HAND AT HOME SER	RVICES INC.
DOCUMENT NUMB	ER:	P06000106975	
The enclosed Articles	of Amendment and fee a	re submitted for filing.	
Please return all corres	pondence concerning thi	is matter to the following:	·
		LAYDA ALMAGUER	
	N	lame of Contact Person	
	HELPING HAN	ND AT HOME SERVICES INC	<u> </u>
		Firm/ Company	
1350 WEST 30 STREET			
		Address	
· ·	HI	ALEAH, FL 33012	
	C	ity/ State and Zip Code	
	E-mail address: (to be use	d for future annual report notification)	
For further information	concerning this matter,	please call:	
	DA ALMAGUER	u: (53-1944
Name of C	ontact Person	Area Code & Daytime Te	lephone Number
Enclosed is a check for	the following amount n	nade payable to the Florida Depar	tment of State:
\$35 Filing Fee	✓ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$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 Circ	le
		Tallahassee, FL 32301	

Articles of Amendment

FILED

Articles of	Incorporation	/ the Last Last
	of	2009 NOV -2 PM 3: 4
HELPING HAND AT HOME		OF GOTTA DAY OF PARTY
· (Name of Corporation as currently filed v	with the Florida Dept. of State)	SECRETARY OF STATE TALLAHASSEEFFLORID
P060001069	975	7 7 1 mm do 1 11 1 7 1 do 10 1 mm 1 7 7 1 mm 1 7 7 1 mm
(Document Number of Cor	poration (if known)	
Pursuant to the provisions of section 607.1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this Florida Profit Corpo	pration adopts the following
A. If amending name, enter the new name of the corpo	ration:	
HELPING HANDS AT HOM	IE SERVICES INC.	The new
name must be distinguishable and contain the word abbreviation "Corp.," "Inc.," or Co.," or the designation name must contain the word "chartered," "professional as	n "Corp," "Inc," or "Co". A pr	ofessional corporation
B. Enter new principal office address, if applicable:	1350 WEST 30 STREE	<u>:T</u>
(Principal office address <u>MUST BE A STREET ADDRE</u>	SS) HIALEAH FLORIDA 33	<u>8012</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1350 WEST 30 STREE	-
	TIALEAN FLORIDA 330	<u></u>
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent:		e name of the
New Registered Office Address:	(Florida street address)	
	PI	• •
	(City) (Zip Cod	orida de)
		,
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am		ations of the position.
Signature of	New Registered Agent, if changing	 g

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 nevessary)

Title ^	<u>Name</u>	Address	Type of Action
	 		□ Damaus
	nding or adding additional Artinditional Artinditional sheets, if necessary).		
		hange, reclassification, or cancella	
	not applicable, indicate N/A)	ndment if not contained in the am	endment asen.

The date of each amendment		
500 11 11 10 11 11	(date of adoption is required)	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/we	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	ere 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)	
	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Dated 10/2		
Signature (By	y Agy (1) Agy (2) Agy	
sele	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	ADELAYDA ALMAGUER	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	