P07000024753

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SECRETARY OF STATE DIVISION OF CORPORATIONS

Mame Ch8/ccs May 116,08

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Custom	Health Care Inc	
NAME OF CORPORATION: CUSTOM	I Call Call Tile.	
DOCUMENT NUMBER: _ PO 1000	524753	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this r	natter to the following:	
Trina Rozier (Name of C	Contact Person)	
Custom Health Care	Company)	
3420 8th Ave East	ddress)	
Palmetto, FL 34221 (City/State	and Zip Code)	
For further information concerning this matter, ple	ease call:	
Trina Rozier (Name of Contact Person)	at (<u>941</u>) <u>\$12-20</u> (Area Code & Daytime Tel-	
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\times \$43.75 Filing Fee \$\times \$\text{Certificate of Status}\$	\$43.75 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 Circle Tallahassee, FL 32301	



April 7, 2008

TRINA ROZIER CUSTOM HEALTH CARE, INC. 3420 8TH AVENUE EAST PALMETTO, FL 34221

SUBJECT: CUSTOM HEALTH CARE, INC.

Ref. Number: P07000024753

We have received your document for CUSTOM HEALTH CARE, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is F78157 - CUSTOM CARE, INC..

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Letter Number: 108A00020293

Irene Albritton Regulatory Specialist II

Division of Corporations - P.O. BOY 6327 - Tallahassae, Florida 32314

Articles of Amendment to Articles of Incorporation of Custom Health Care IV. (Name of corporation as currently filed with the Florida Dept. of State) POIDOO24753 (Document number of corporation (if known)

1,0000-100.
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
Custom Care Soloutions Inc
Custom Care Soloutions, Inc. (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
N/A
,
•
(Attach additional pages if necessary)
If an amendment provides for 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)
·
(continued)

The date of each amendment(s) adoption: 3/28/08
Effective date if applicable: 4/1/08
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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.
Signature Trune Rozion (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) Trina Rozier (Typed or printed name of person signing)
President (Title of person signing)

FILING FEE: \$35