

PO7000066087

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(Address)

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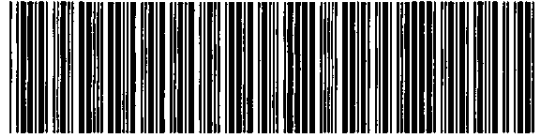
(Business Entity Name)

(Document Number)

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*Name Change
& Amend*

02/24/12--01036--009 **35.00

FILED
2012 FEB 24 AM 8:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

*DR
2/28/12*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: D.P.S. Home Health Agency, Inc.

DOCUMENT NUMBER: P07000066087

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

Please return all correspondence concerning this matter to the following:

Dorothy Laurent

Name of Contact Person

DPS HOME HEALTH AGENCY, INC.

Firm/ Company

900 FEDERAL HIGHWAY SUITE 102

Address

LAKE PARK, FL 33403

City/ State and Zip Code

dps.healthagency@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dorothy Laurent

Name of Contact Person

at (561) 401-7629

Area Code & Daytime Telephone Number

Enclosed is a check 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 &
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

Articles of Amendment
to
Articles of Incorporation
of

FILED

2012 FEB 24 AM 8:47

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

D.P.S. HOME HEALTH AGENCY, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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:

DPS HOME HEALTH AGENCY, INC

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:

(Mailing 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 new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office 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)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

| | | |
|-----------------|-----------|--------------------|
| <u>X</u> Change | <u>PT</u> | <u>John Doe</u> |
| <u>X</u> Remove | <u>V</u> | <u>Mike Jones</u> |
| <u>X</u> Add | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u> (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|---|-------------------|---|--|
| 1) <u> </u> Change <u>X</u> <u> </u> Add <u> </u> Remove | <u>VP</u> | <u>Dorothy Laurent</u> | <u>11660 south Sea Court</u> <u>Wellington, FL 33449</u> |
| 2) <u> </u> Change <u> </u> Add <u> </u> Remove | <u> </u> | <u> </u> | <u> </u> <u> </u> |
| 3) <u> </u> Change <u> </u> Add <u> </u> Remove | <u> </u> | <u> </u> | <u> </u> <u> </u> |
| 4) <u> </u> Change <u> </u> Add <u> </u> Remove | <u> </u> | <u> </u> | <u> </u> <u> </u> |
| 5) <u> </u> Change <u> </u> Add <u> </u> Remove | <u> </u> | <u> </u> | <u> </u> <u> </u> |
| 6) <u> </u> Change <u> </u> Add <u> </u> Remove | <u> </u> | <u> </u> | <u> </u> <u> </u> |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

All these information are being made part of the Corporate Bylaws of DPS Home Health Agency, Inc.

1- This Corporation DPS Home Health Agency, Inc has 100 shares.

2- This corporation is owned by the three shareholders at equal shares of 33.33% each.

3- According to Article IV.(4). of the bylaws, acceptance of resignation shall not be necessary to make it effective therefore resignation upon receipt thereof will terminates ownership.

4- According to Article V.3.(a)(b) The holder of any shares is the absolute owner for all purposes and no other persons should have interests in those shares except otherwise provided by law. Holders of shares may chose to sell, give, transfer as provided by this article.(see Corporate Bylaws the Agency).

5- As of January 31, 2012 a mediation resulted to corporation may be sold to or bought in whole or in part by any of the shareholders/owners or by third party as prescribed by governing rules and regulations of the licensing agencies set for Home Health Agencies.

6- All shareholders are requires to receive notice for a special meeting as prescribed by the bylaws Article II. (3).(4). should any amendment be made to the documents of the Corporation.-----

7- The officer Dorothy Laurent is being added back to Corporation. -----

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)

N/A

The date of each amendment(s) adoption: FEBRUARY 6, 2012

Effective date if applicable: FEBRUARY 6, 2012

(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

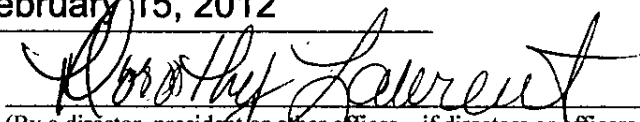
by _____."
(voting group)

☐ 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 February 15, 2012

Signature



(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)

Dorothy Laurent

(Typed or printed name of person signing)

Vice President of the Corporation

(Title of person signing)