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To:

Division of Corporations

: (850)617-6380 Fax Number

From:

Account Name : LAW OFFICES OF DAGMAR LLAUDY, P.A.

Account Number : 120050000114 : (305)854-1775 Phone : (305)854~2282 Fax Number

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CORAL WAY HOME HEALTHCARE, INC. Certificate of Status Certified Copy

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT

OF

CORAL WAY HOME HEALTHCARE, INC.

Pursuant to the provisions of Section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:

FIRST:

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Amendment adopted: CHANGE OF ARTICLE V

The registered agent of this corporation shall be:

DAGMAR LLAUDY

1333 CORAL WAY, SUITE 101 MIAMI, FLORIDA 33145

SECOND:

Amendment adopted: CHANGE OF ARTICLE VI

The Board of Directors Shall be composed by two (2) persons who shall be:

DAGMAR LLAUDY

(P)

50% **SHAREHOLDER**

1333 CORAL WAY, SUITE 101

MIAMI, FLORIDA 33145

ARLYN GONZALEZ

(VP)

50% SHAREHOLDER

1333 CORAL WAY, SUITE 101 MIAMI, FLORIDA 33145

This amendment shall be effective from 23 day of April, 2008.

The resting Articles shall remain unaltered.

FOURTH:

THIRD:

The Board of Directors approved the amendment adopted. The number

of votes cast for this amendment were sufficient for approval and

shareholders' action was not required.

Signed this 3 day of April, 2008.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT

HAVING BEEN NAMED AS THE REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Signed this 23 day of April, 2008.

PRESIDENT