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**Division of Corporations**  
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**COR AMND/RESTATE/CORRECT OR O/D RESIGN**  
**GOOD QUALITY HOME HEALTH CARE INC.**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**H10000241724****ARTICLES OF AMENDMENT****TO****ARTICLES OF INCORPORATION****OF****GOOD QUALITY HOME HEALTH CARE INC**

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**(PRESENT NAME)**

PURSUANT TO THE PROVISIONS OF SECTION 607,1006, FLORIDA STATUTES, THIS CORPORATION ADOPTS THE FOLLOWING ARTICLES OF AMENDMENT TO ITS ARTICLE OF INCORPORATION:

**FIRST:** AMENDMENT(S) ADOPTED: (INDICATE ARTICLE NUMBER(S) BEING AMENDED ADDED OR DELETED)

**ARTICLES VI - DIRECTORES**

**DELETE: RAYMOND A. ADAY                      PRESIDENT**  
**2100 WEST 76<sup>TH</sup> ST. SUITE 406, HIALEAH, FL 33016**

**ADD: ELSA TORRES                              PRESIDENT**  
**2100 WEST 76<sup>TH</sup> ST. SUITE 406, HIALEAH, FL 33016**

**New registered Agent**

**ELSA TORRES**  
**2100 WEST 76<sup>TH</sup> ST. SUITE 406, HIALEAH, FL 33016**

**SECOND:** 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, ARE AS FOLLOWS:

**THIRD:** THE DATE OF EACH AMENDMENT'S ADOPTION: 11/05/10

**FOURTH:** ADOPTION OF AMENDMENT(S) (CHECK ONE)

**X** THE AMENDMENT(S) WAS/WERE APPROVED BY THE SHAREHOLDERS. THE NUMBER OF VOTES CAST FOR THE AMENDMENT (S) WAS/WERE SUFFICIENT FOR APPROVAL.

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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 SEPRATELY ON THE AMENDMENT(S)

"THE NUMBER OF VOTES CAST FOR THE AMENDMENT(S) WAS/WERE SUFFICIENT  
FOR APPROVAL

BY \_\_\_\_\_"  
(VOTING GROUP)

- \* THE AMENFMENT(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.

SIGNED THIS 05 DAY OF NOVEMBER, 2010.

SIGNATURE \_\_\_\_\_

(By the Chairman or Vice Chairman of the Board  
of Directors, President or other officer if adopted  
by the shareholder(s))

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

RAYMOND A. ADAY

\_\_\_\_\_  
Typed or printed name

PRESIDENT

\_\_\_\_\_  
Title

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF  
PROCESS FOR THE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS  
CERTIFICATED, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT  
AND AGREE TO ACT IN THIS CAPACITY.

x Elisa Harris  
REGISTERED AGENT SIGNATURE

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