P08000038290

(Re	questor's Name)	
(Ad	dress)	,
(Ad	dress)	<u>.</u>
(Cit	y/State/Zip/Phone	÷#)
PICK-UP	TIAW	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

Amend & MC

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FEB 1 7 2010

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPO	RATION:	Gentler Care, INC.
DOCUMENT NUM	BER:	P08000038290
The enclosed Articles	s of Amendment and fee	e are submitted for filing.
Please return all corre	espondence concerning	this matter to the following:
_		Janet Shields Name of Contact Person
_	GENTLER C	ARE NURSING SERVICES, INC.
		Firm/ Company
		149 NW 79-Terrace Address
		Audiess
_		Margate, FL 33063 City/ State and Zip Code
	jamar E-mail address: (to be u	rie50@hotmail.com used for future annual report notification)
For further information	on concerning this matte	er, please call:
	net Shields Contact Person	at (954) 956-0591 Area Code & Daytime Telephone Number
Enclosed is a check for	or the following amount	made payable to the Florida Department of State:
□\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	
Mailing Add Amendment S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 26, 2010

JANET SHIELDS GENTLER CARE INC. 149 NW 79TH TERR MARGATE, FL 33063

SUBJECT: GENTLER CARE INC. Ref. Number: P08000038290

We have received your document for GENTLER CARE INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 110A00002092

Division of Compositions D.O. DOV 6207 Well-boson Florida 20214



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 4, 2010

JANET SHIELDS GENTLER CARE INC. 149 NW 79TH TERR MARGATE, FL 33063

SUBJECT: GENTLER CARE INC. Ref. Number: P08000038290

We have received your document for GENTLER CARE INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

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) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 610A00002910

Articles of Amendment to **Articles of Incorporation** of

	FII	ED
2016	PEB 12	CO
State ALLA	ETARY OF	ED AM 9:03
	SEE. F	STATE ORIOA

GENTLER CARE, INC.

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

P08000038290

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	06, Florida Statute	es, this <i>Florida Profit C</i>	Corporation adopts the follo
A. If amending name, enter the new name of	of the corporation	<u>ı:</u>	
GENTLER CARE	NURSING SEI	RVICES, INC.	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or th name must contain the word "chartered," "pr	e designation "Co	orp," "Inc," or "Co". A	professional corporation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		149 NW 79 Terrace	<u> </u>
		Margate, FL 33063	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)			
D. If amending the registered agent and/or new registered agent and/or the new reg			r the name of the
Name of New Registered Agent:	Norman A. Lo	bban	_
New Registered Office Address:	4448 Inverrar	y Boulevard la street address)	-
	Lauderhill		, Florida 33319
	(City)	(Zip	Code)
New Registered Agent's Signature, if change	ing Registered As	entr	
I hereby accept the appointment as registered			bligations of the position.
	Signlature of New .	Registered Agent, if chan	ging

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Remove
			_
			<u>.</u>
			
			L Remove
E. If ame	nding or adding additional Articles,	enter change(s) here:	
(a <i>ttach</i> Article	additional sheets, if necessary). (Be 1. The new name of the corporat	specific) ion is GENTLER CARE N	URSING SERVICES,
INC.			/
			<u> </u>
F Ifan	amendment provides for an exchang	a reclassification or concelle	tion of issued shares
<u>provi</u>	sions for implementing the amendmo		
(ij	f not applicable, indicate N/A)		
	N/A		
		··	

The date of each amendmen	t(s) adoption: January 29, 2010
Effective date <u>if applicable</u> :	January 29, 2010
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	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)
The amendment(s) was/we action was not required.	re 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
	uary 29, 2010
Signature (By	a director, president or other officer – if directors or officers have not been
sele	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Janet Shields
	(Typed or printed name of person signing)
	President
	(Title of person signing)