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(Re	equestor's Name)	
(Ad	ldress)	
(Address)		
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: All Ab	out You Home Care, Inc.
DOCUMENT NUMBER: P08000071	996
The enclosed Articles of Amendment an	d fee are submitted for filing.
Please return all correspondence concern	ing this matter to the following:
Britt Blakeley	
	Name of Contact Person)
Directed Equity Inc.	
	(Firm/ Company)
19673 Solar Cir, Suite	201
	(Address)
Parker, CO 80134	
	City/ State and Zip Code)
For further information concerning this n	natter, please call:
Britt Blakeley	at (877) 839-8064
· (Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following am	ount:
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

All About You Home Care, Inc.		
(Name of corporation as currently filed with the Florida Dept. of State)	23.	_
	— m.	8
P08000071996	至高	A
(Document number of corporation (if known)	20	
B		**
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit C</i> adopts the following amendment(s) to its Articles of Incorporation:	orporuti	0 <u>F</u>
adopts the following amendment(s) to its Africies of incorporation:	48	~
NEW CORPORATE NAME (if changing):	<u> </u>	65
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc (A professional corporation must contain the word "chartered", "professional association," or the abbreviation	.," or "Co.' eviation "P	') '.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Artic and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	le Numb	er(s)
Article III The purpose for which this corporation is organized is:		
Delete: ANY AND ALL LAWFUL BUSINESS.		<u></u>
Add: FOR THE SOLE PURPOSE OF OPERATING A RIGHT AT HOME FR	ANCHIS	<u>3E.</u>
		
		
		 -
		
(Attach additional pages if necessary)		
If an amendment provides for exchange, reclassification, or cancellation of issued sha for implementing the amendment if not contained in the amendment itself: (if not application)		

(continued)

The date of each amendment(s) adoption: 8/06/2008
Effective date if applicable:
(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 (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)
Britt Blakeley, Directed Equity, Inc. (Typed or printed name of person signing)
Director of Business Development
(Title of person signing)

FILING FEE: \$35