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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

Tallahassee, FL 32314

NAME OF CORP	ORATION:	Humane Services Co	rp
DOCUMENT NU	MBER:	P09000011540	
The enclosed Artic	les of Amendment and fee a	re submitted for filing.	
Please return all co	rrespondence concerning thi	is matter to the following:	
-		Ariadna Valdes	<u>.</u>
	N	lame of Contact Person	
-	Hur	mane Services Corp	
		Firm/ Company	
-	175 Fonta	ainebleau Blvd Suite 1R7	
		Adultos	
-		Miami FL 33172	
		•	
	ariadn E-mail address: (to be use	av@yahoo.com d for future annual report notification)	
For further informa	tion concerning this matter,	please call:	
	riadna Valdes	at \	508-1235
Name	of Contact Person	Area Code & Daytime To	elephone Number
Enclosed is a check	for the following amount n	nade payable to the Florida Depa	rtment of State:
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ac Amendmen Division of P.O. Box 63	t Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

OIVISION OF CURPORATIONS  09 OCT 13	
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OI .	00.00	URATIO		
Humane Services C	Corp 09 OCT 13 PM	<b>3. ,</b> ~		
(Name of Corporation as currently filed with	the Florida Dept. of State)	3.47		
P09000011540				
(Document Number of Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the fo	llowing		
A. If amending name, enter the new name of the corporation	on:			
AGC Prescription Assistance F	Program Corp The ne	w		
name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associations and the word "chartered," "professional associations and the word "chartered," "professional associations are must contain the word "chartered," "professional associations are must contain the word "corp."	poration," "company," or "incorporated" or the Corp," "Inc," or "Co". A professional corporation	ne		
B. Enter new principal office address, if applicable:	175 Fontainebleau Blvd Suite 1R7			
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Miami FL 33172			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	175 Fontainebleau Blvd Suite 1R7			
	Miami FL 33172			
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad  Name of New Registered Agent:				
New Registered Office Address: (Flor	(Florida street address)			
(City)	, Florida, Florida			
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	Agent:	1.		

Page 1 of 3

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) **Title Name** <u>Address</u> **Type of Action** ☐ Add ☐ Remove \_\_\_\_\_ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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)

The date of each amendment(s	) adoption:
	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	
(i	voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated Octob	Praine Valdes
(By a	director, president or other officer - if directors or officers have not been
	ted, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Ariadna Valdes
	(Typed or printed name of person signing)
	THE OWNER - ACOP SECTION (Title of person signing)
	(Title of person signing)