

P10000010869

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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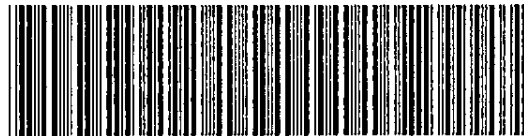
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Gifted Health Care, Inc.

DOCUMENT NUMBER: P10000010869

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Evelyn Cadet

Name of Contact Person

Gifted Health Inc.

Firm/ Company

3200 N Federal Highway #206-4

Address

Boca Raton, FL 33431

City/ State and Zip Code

ebcadet2000@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Evelyn Cadet

Name of Contact Person

at (305)

975-5419

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is enclosed)

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

Gifted Health Care, Inc.

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

P10000010869

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: _____

New Registered Office Address: _____
(Florida street address)

_____, Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
VP	Marie Maud Morin	14955 SW 39 Ct Miramar, FL 33027	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

This corporation is authorized to accept the transfer of the 33.3% shares of common stock from Marie M. Morin who waived all her rights to the corporation. Said shares will be equally transferred to: Marie Jean-Baptiste Sec. and Evelyn Cadet P.(V) the two(2) Directors of this corporation as of 01-12-2011. Marie Jean-Baptiste address: 3942 West Lake Estate Drive Davie, FL 33328.

Evelyn Cadet Address: 180 NE 45 St Miami, FL 33137

(see ex. A)

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)

This amendment provides for a reclassification of shares as per the corporation's resolution to approve and authorize the transfer of 33.3% of the VP shares equally to Jean-Baptiste and Cadet, Thus: a total of fifty(50%) of Shares of common stock to Jean-Baptiste and fifty(50%) of shares of common stock to Cadet as of 01-12-2011.

Ex. A

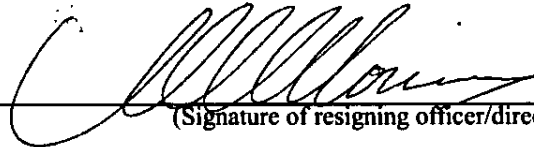
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, MARIE MAUD MORIN, hereby resign as VICE PRESIDENT
(Title)

of GIFTED HEALTH CARE, INC
(Name of Corporation)

P10000010869, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

 02/04/2011
(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

The date of each amendment(s) adoption: 01-12-2011
(date of adoption is required)
Effective date if applicable: 01-12-2011
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted 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.

Dated 02-05-2011

Signature Evelyn Cadet RN
(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)

Evelyn Cadet
(Typed or printed name of person signing)

President
(Title of person signing)