## P10000031414

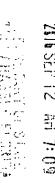
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C. CARROTHERS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Ideal Adult Daycare Center Inc.							
DOCUMENT NUMBER: P10000031414							
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
Marjorie Rodriguez							
	Name of Contact Person						
Ideal Adult Daycare Cente	er Inc.						
-	Firm/ Company						
5972 W 16th Ave.							
	Address						
Hialeah, FL 33012							
<del></del>	City/ State and Zip Code						
idealadultdaycare@hotmail.com							
<del>-</del>	e used for future annual report notification)						
E-man address. (10 be	t used for future lamidal report notification;						
For further information concerning this matter, ple	lease call:						
Marjorie Rodriguez	at (						
Name of Contact Person	Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:							
□ \$35 Filing Fee	<del>_</del>						
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

Ideal Adult Daycare Center Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P10000031414 (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: Marjorie Rodriguez Name of New Registered Agent 5972 W 16th Avenue (Florida street address) Florida\_33012 Hialeah New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar Aith 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	Victoria Chang	5972 W 16th Ave
Add			Hialeah, FL 33012
X Remove			
2) Change	Р	Marjorie Rodriguez	5972 W 16th Ave
X Add			Hialeah, FL 33012
Remove			
3 ) Change	V.P.	Victoria Chang	5972 W 16th Ave
X Add			Hialeah, FL 33012
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u>-</u>
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
<del></del> .	
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lf an amendment provides for an avail	change, reclassification, or cancellation of issued shares,
	endment if not contained in the amendment itself:
	rendment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	rendment if not contained in the amendment itself:
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provisions for implementing the ame	nendment if not contained in the amendment itself:

	09/01/2016	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	9/01/2016	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will Department of State's records.	I not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) 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	st for the amendment(s) was/were sufficient for approval	
by	·	
•	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
09/0 Dated	1/2016	
(By :	a director, president or other officer - if directors or officers have not been	_
	cted, by an incorporator – if in the hands of a receiver, trustee, or other court	
арро	ointed fiduciary by that fiduciary)	
	Marjorie Rodriguez	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	