P110000092424

Ramon Reyes P.A. Accounting Office 5035 Palm Avenue Hialeah, FL 33012
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Essence Enag, Name,
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Amend

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

BEST HOME CARE SERVICES, INC

(Name of Corporation as c	urrently filed with t	he Florida Dept. of Sta	<u>te</u>)
P11000092424			
(Document 1	Number of Corporati	on (if known)	
Pursuant to the provisions of section 607. following amendment(s) to its Articles of In		es, this Florida Profit	Corporation adopts the
A. If amending name, enter the new nam	e of the corporation	<u>n:</u>	
The new name must be distinguishable "incorporated" or the abbreviation "Corp" "Co". A professional corporation is association," or the abbreviation "P.A."	o.," "Inc.," or Co.,	" or the designation "	Corp," "Inc," or
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		7600 W 20 AVE SUITE 1125 38	
		HIALEAH, FL 33016	
			N 8 CC
	•		PH PUT
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF			8 PH 1: 24
		•	
D. If amending the registered agent and/ new registered agent and/or the new i			er the name of the
Name of New Registered Agent:	CARLOS SAN	VALLADARES	
	7600 W 20 A	AVE SUITE 112	
New Registered Office Address:	(Flori	da street address)	-
	HIALEAH		Florida 33016
		(City)	(Zip Code)
New Registered Agent's Signature, if cha I hereby accept the appointment as regist position.			ot the obligations of the
	Signature of New	Registered Agent if cha	 maina

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them

on an additional sheet.)

Title(s)	<u>Name</u>	•	Address	
1) P/S	CARLOS SAN VALLADAR	ES 7600 W	20 AVE SUITE 112	
		HIALE	AH, FL 33016	
2)	<u> </u>			
				
3)				
	į			
4)				
5)				
S)		-		
6)				
	:		·	
le Della Olivo				
II REMOVING removed:	an officer and/or director, please	list the title(s) ar	id name of the officer/	<u>director to be</u>
Title(s)	<u>Name</u>	Title(s)	<u>Name</u>	
1) P	CARLOS DIAZ	4)		
2)	 	5)		
3)	<u> </u>	6)		

	ticles, enter change(s) here
(attach additional sheets, if necessary).	(Be specific)
TO REPLACE REGISTER AGENT AND PRI	ESIDENT CARLOS DIAZ FOR CARLOS SAN VALLADARES.
·	•
<u></u>	<u></u>
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendmen	t(s) adoption: 11/11/2011
Effective date <u>if applicable</u> :	11/11/2011 (date of adoption - required)
Effective date ir appricable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	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 ed 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	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
<u> </u>	(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.	re adopted by the incorporators without shareholder action and shareholder
Dated_11/	11/2011
Signature	Carlos Son
(By sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	CARLOS SAN VALLADARES
	(Typed or printed name of person signing)
	PDECIDENT
	PRESIDENT
	(Title of person signing)