P11000094574

(Requestor's Name)	-
(Address)	_
	_
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
	_
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:]
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Office Use Only



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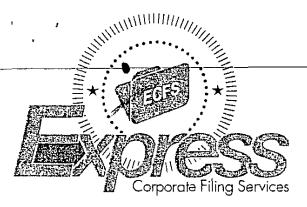
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AUG 2 0 2012



1000 Ponce de Leon Blvd. Suite: 101

Coral Gables, FL 33134

Phone: 305 444 4994

Email-filing@ecfsfiling.com

OFFICE USE ONLY

Examiner's Initials

Eman- ming@ecisim	ig.com
CORPORATION NAME(S) & I	OOCUMENT NUMBER(S) (if known):
1. Crystal Par	racise Adul-1 Day Care, J
2.	
(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4. (Corporation Name)	· (Document #)
(Corporation Name)	(Document 9)
Walk in Pick up t	ime Certified Copy
Mail out Will wait	Photocopy Certificate of Status
	•
NEW FILINGS	AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/ Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger
OTHER FILINGS	REGISTRATION/
Annual Report	QUALIFICATION
Fictitious Name	Foreign
Name Reservation	Limited Partnership

Reinstatement

Trademark

Other

Articles of Amendment to Articles of Incorporation of

FILED 2012 AUG 20 AM 10: 39

CRYSTAL PARADISE ADULT DAY CARE INC.

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

P11000094574

(Document Number of Corporation (if known)

									The new
					"corporation,"				
					"Inc," or "Co abreviction "P.		ional corporati	ion name must	contain the
				if applicable: TREET ADDR	LESS)	,	···	· · · · · · · · · · · · · · · · · · ·	-
								· · · · · · · · · · · · · · · · · · ·	.
			ress, if appli BE A POST (<u>cable:</u> OFFICE BOX)				
							<u></u>		-
D. 1	If amending	the registe	red agent an	d/or registere	d office address	s in Florida.	enter the name	of the	•
_	· · · · · · · · · · · · · · · · · · ·			registered o					
	Mama	f dian Darin	tered Agent	ODALYS	S CORDE	RO			
	transe of	TIEN NEXT	serea regens	635	5 30	0 6	67 2	uz 3ce), 4w,
	New Res	gistered Off	ice Address:	K	(Florida strees IAM)' (City)	address)	, Florida	33/49 (Zip Code)	<i>!</i> ,
								•	

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 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.

Example:

X Change	PT John D	<u>oc</u>	
X Remove	Y Mike J	oqes	
X Add	<u>SV</u> <u>Sally S</u>	mith .	
Type of Action (Check One)	Title	Name	Address
1) Change Add	VP/T	JORGE A. ALVAREZ-BERGOLLA 8/16/2012	6355 SW 8 STREET STE 2W. 3W, 4W, 5W MIAMI, FL 33144
2) Change Add	- Automore		Will thin, i to OO 1-1-1
Remove 3) Change Add			
Remove 4) Change Add Remove			
5) Change			
Remove 6) Change Add Remove			
A 2 5 1 2 4 2 4 2 4 7 4 7 4 7 4 7 4 7 4 7 4 7 4			

Page 2 of 4

SHIRLEY ALMAZAN

AY COMMISSION # DD 847504

EXPIRES: March 14, 2013

EXPIRES: March 14, 2013 Bonded Thru Budgel Notary Services

(Attach add	tional sheets, if necessary). (Be specific)			
	<u> </u>				
N . V	<u> </u>				
 	A		·		
 					
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···					
					···
					
					
. If an amen	ment provides for an exchan	ge, reclassificatio	n, or cancellation	of issued shares,	
provisions	for implementing the amenda	ment if not contai	ned in the amend	ment itself:	
(if not	applicable, indicate N/A)				
 	·····				
		- 			

The date of each amendment(s) as	doption: AUGUST 16,2012
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(sufficient for approval.
	proved by the shareholders through voting groups. The following statemer 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)
action was not required. The amendment(s) was/were add	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
action was not required.	SOT 40 0040 a
Dated AUGU	ST 16,2012
Signature	Alh.
(By a d.	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)
	ODALYS CORDERO
	(Typed or printed name of person signing)
	(P/S) Uh.
	(Title of person signing)