P110000999558

(Re	equestor's Name)	
(Ad	ldress)	
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FEB 25 2015 C. CARROTHERS

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Webcare, Inc					
DOCUMENT NUMBER: P11000099558					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Calvin Sibley					
Name of Contact Person					
Webcare, Inc					
Firm/ Company					
16850 Collins Ave #112264					
Address					
Sunny Isles Beach, FL 33160					
City/ State and Zip Code					
calvin.sibley@gmail.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Calvin Sibley <u>at (</u> 305 <u>978-0682</u>					
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 Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)					
Mailing Address Street Address					
Amendment Section Amendment Section					
Division of Corporations Division of Corporations					
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florid	
P11000099558	SEARTAL FOR TAXIL
(Document Number of Corporation (if known	own)
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> s Articles of Incorporation:	ida Profit Corporation adopts the following amendment(
. If amending name, enter the new name of the corporation:	
Solutions Home Buyers, Inc	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". vord "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation A professional corporation name must contain the
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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 new registered agent and/or the new registered office address:	in Florida, enter the name of the
Name of New Registered Agent	
(El-si In second -	ddress)
(Florida street a	
New Registered Office Address:	, Florida

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	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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		-			
			cellation of is	sued shares,	
f an amendment provides for an excl	nange, reclassific	<u>ation, or can</u>			
provisions for implementing the ame	hange, reclassific endment if not co	ation, or can ntained in th	e amendmen	itself:	
f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassific endment if not co	ation, or can ntained in th	e amendmen	itself:	
provisions for implementing the ame	hange, reclassific endment if not co	ation, or can ntained in th	e amendmen	itself:	, <u>.</u>
provisions for implementing the ame	hange, reclassific endment if not co	ation, or can	e amendmen	itself:	
f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassific endment if not co	ation, or can	e amendmen	itself:	
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provisions for implementing the ame	hange, reclassific endment if not co	ation, or can	e amendmen	itself:	

The date of each amendment(s) adoption: 2/17/2015	, if other than the
date this document was signed.	
Effective date if applicable:	
(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 by the shareholders was/were sufficient for approval.	e amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The foll must be separately provided for each voting group entitled to vote separately on the amend	
"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 a action was not required.	and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and s action was not required.	hareholder
Dated_2/17/2015	
Signature Calin Sibler	
(By a director, president or other officer fit directors or officers have selected, by an incorporator — if in the hands of a receiver, trustee appointed fiduciary by that fiduciary)	
Calvin Sibley	
(Typed or printed name of person signing	ng)
President	
(Title of person signing)	