## P12000033389

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Amendaca

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	Saving Lives Hom	e Health Agency, inc.	
DOCUMENT NUMBI	P12000033389	·	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
	Ra	ymond R Hammons	
_	· · · · · · · · · · · · · · · · · · ·	Name of Contact Perso	en .
	Saving I	Lives Home Health Agency	y, Inc.
_		Firm/ Company	
	1881	SE Port Saint Lucie Blvd	
_		Address	
	Port S	aint Lucie, FL 34952	
<del></del>		City/ State and Zip Cod	le
	rustyham	mons11@me.com	
<del> </del>	E-mail address: (to be us	ed for future annual report	t notification)
For further information	concerning this matter, pleas	se call:	
Raymond R Hammons		407 at (	341-6456
Name of	Contact Person	<del></del>	ode & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State;
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	2\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 hassee, FL 32314	Ameno Divisi Cliftor 2661 I	Address dment Section on of Corporations n Building Executive Center Circle assee, FL 32301

## **Articles of Amendment** Articles of Incorporation

MIKE 17 KD Saving Lives Home Health Agency, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P12000033389 (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: Raymond R Hammons Name of New Registered Agent 1881 SE Port Saint Lucie Blvd (Florida street address) Port Saint Lucie 34952 New Registered Office 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.

## 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 Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	nes		
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change	· · · · · · · · · · · · · · · · · · ·	<del></del>		-	
Add					
Remove					
2) Change	<del></del>			-	
Add					
Remove					
3) Change		<del></del>		-	
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4) Change				_	
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Remove					
5) Change		<del>-</del>		-	
Add					
Remove					
6) Change		_		_	
Add					
Remove					

(Attach addition	adding additional Articles, enter change(s) here: al sheets, if necessary). (Be specific)
<del></del>	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
provisions for (if not app	nt provides for an exchange, reclassification, or cancellation of issued shares, implementing the amendment if not contained in the amendment itself: licable, indicate N/A) hange of information pertaining to Saving Lives Home Health Agency, Inc. shareholders. The update
<del></del>	formation is as follows:
LHHA Holdings	

01-20-2017	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
01-20-2017	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date w document's effective date on the Department of State's records.	ill not be listed as the
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)	
(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.	
01-20-2017	
Signature (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)	
Raymond K. Hammons	
(Typed or printed name of person signing)	
President	
(Title of person signing)	<del></del>