## P12000059939

| (Re                                     | equestor's Name)  |                                       |  |
|---|-------------------|---------------------------------------|--|
| (Ad                                     | dress)            |                                       |  |
| (Ad                                     | dress)            | · · · · · · · · · · · · · · · · · · · |  |
| (City/State/Zip/Phone #)                |                   |                                       |  |
| <u></u>                                 | WAIT              | MAIL                                  |  |
| (Bu                                     | siness Entity Nar | me)                                   |  |
| (Document Number)                       |                   |                                       |  |
| Certified Copies                        | _ Certificates    | s of Status                           |  |
| Special Instructions to Filing Officer: |                   |                                       |  |
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Anda 10/3/13 TO: Amendment Section

## COVER LETTER

| Division of Corporations  |  |  |  |  |
|---|--|--|--|--|
| NAME OF CORPORATION: J. Private Home Care, Inc  |  |  |  |  |
| DOCUMENT NUMBER: P1200005993  |  |  |  |  |
| The enclosed Articles of Amendment and fee are s  |  |  |  |  |
| Please return all correspondence concerning this m  |  |  |  |  |
| Freaze return an correspondence concerning ons in   | atter to pie following.  |  |  |  |
| Jeremias Alvare   | Z  |  |  |  |
| <del></del>   | Name of Contact Persor   |  |  |  |
| J. Private Home   | Care, Inc  |  |  |  |
| Firm/ Company   |  |  |  |  |
| 11098 Biscayne Blvd. Ste 401-22   |  |  |  |  |
| Address   |  |  |  |  |
| Miami, FL 33161   |  |  |  |  |
|   | City/ State and Zip Code   |  |  |  |
| jalvarez1274@hotm   | ail.com  |  |  |  |
| <u></u> -   | used for future annual report                                      | notification)  |  |  |
|   |  | •  |  |  |
| For further information concerning this matter, plea  | aso call;  |  |  |  |
| Jeremias Alvarez  | <sub>at (</sub> 305  | <sub>)</sub> 469-4511  |  |  |
| Name of Contact Person  | Area Co  | de & Daytime Telephone Number  |  |  |
| Enclosed is a check for the following amount made payable to the Florida Department of State: |  |  |  |  |
| ■ \$35 Filing Fee   | ☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |  |  |
| Mailing Address   |  | Address  |  |  |
|   | Amendment Section Amendment Section                                |  |  |  |
| Division of Corporations<br>P.O. Box 6327   |  | Division of Corporations<br>Clifton Building   |  |  |
| Tallahassee, FL 32314   |  |  |  |  |
| Tullahassee, FL 32301   |  |  |  |  |



September 9, 2013

JEREMIAS ALVAREZ 11098 BISCAYNE BLVD STE. 401-22 MIAMI, FL 33161

SUBJECT: J. PRIVATE HOME CARE, INC.

Ref. Number: P12000059939

We have received your document for J. P.RIVATE HOME CARE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 013A00021147

P 4/7

Articles of Amendment to Articles of Incorporation of

| J. Private Home Care, Inc  | · ·  |
|--|--|
| (Name of Corporation as currently filed with the I   | Florida Dept. of State)  |
| P12000059939   |  |
| (Document Number of Corporation (  | (if known)   |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:  | : Floridu Profit Corporation adopts the following amendment(s) to  |
| A. If amending name, enter the new name of the corporation;  |  |
| N/A  | The new  |
| name must be distinguishable and contain the word "corporatio" (Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation | on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the |
| B. Enter new principal office address, if applicable:  | 11098 Biscayne Blvd. Suite 401-22  |
| (Principal office address MUST BE A STREET ADDRESS)  | Miami, FL 33161  |
| C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)  | 11098 Biscayne Bivd. Suite 401-22  |
|  | Miami, FL 33161  |
| D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address  Name of New Registered Agent  N/A                                | ress in Florida, enter the name of the   |
| (Florida sti   | reet address)  |
| New Registered Office Address: (City)  | Florida  |
| New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar  | t:<br>with 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:

fax 001

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 Doc. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| X Change                      | PT Joh             | n Doe          |                                 |
|-------------------------------|--------------------|----------------|---------------------------------|
| X Remove                      | <u>v</u> <u>Mi</u> | to Jones       |                                 |
| <u>X</u> Add                  | <u>SV</u> Sal      | y <u>Smith</u> |                                 |
| Type of Action<br>(Check One) | Title              | Name           | <u>Addres</u> s                 |
| 1)Change                      |                    | N/A            | 11098 Biscayne Blvd. Ste 401-22 |
| Add                           |                    |                |                                 |
| Remove                        |                    |                |                                 |
| 2) Change                     |                    |                |                                 |
| Add                           |                    |                | <u> </u>                        |
| Remove                        |                    |                |                                 |
| 3 ) Change                    |                    |                |                                 |
| Add                           |                    |                |                                 |
| Remove                        |                    |                |                                 |
| 4) Change                     |                    |                |                                 |
| Add                           |                    |                |                                 |
| Remove                        |                    |                |                                 |
| 5) Change                     |                    |                |                                 |
| Add                           |                    |                |                                 |
| Remove                        |                    |                |                                 |
| 6) Change                     |                    |                |                                 |
| Add                           |                    |                |                                 |
| Remove                        |                    |                | <u> </u>                        |

| (Attach additional sheets, if necessary). N/A   | (Be specific)   |
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| F. If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)  N/A | ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself: |
|   |   |
|   |   |
|   |   |
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|   |   |
|   |   |

2013-10-03 15:44

| The date of each amendment(s) adoption:   | if other than th |
|---|------------------|
| 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 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 east 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 and shareholder action was not required.   |                  |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.  |                  |
| Dated 10/02/13/   |                  |
| Dated 10/62/19/   |                  |
| Signature   |                  |
| constant 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) | _                |
| Jeremias Alvarez  |                  |
| (Typed or printed name of person signing)   | _                |
| President   |                  |
| (Title of person signing)   | <del></del>      |