## P12000081041

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	)
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## **COVER LETTER**

O: Amendment Section Division of Corporations					
OCUMENT NUMBER: P120000 81041					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
ROBERT J. SHERMAN					
Name of Contact Person  PROCESSING ENTER, INC.					
225 GLEN GRIAR CIRCLE					
DAYTONA BEACH, FLORIDA 32114					
City/ State and Zip Code  BSHERMAN 27 @ GMAIL. COM  E-mail address: (to be used for future annual report notification)					
or further information concerning this matter, please call:					
Robert J. SHERMAN at 386 547-0750  Name of Contact Person Area Code & Daytime Telephone Number					
nclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee \$\begin{array}{c} \$43.75 Filing Fee & \$\begin{array}{c} \$43.75 Filing Fee & \$\begin{array}{c} \$Certificate of Status & \$Certified Copy & \$Certificate of Status & \$Certified Copy					
Mailing Address Street Address					

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

•	Articles of Amendment	
	to	
$\circ$	Articles of Incorporation	
Y 0 - 0 - 10		
1 ROCESSING	( ENTER,NC.	
(Name of Corporation as current	tty filed with the Florida Dept. of State)	
P 120000 81	041	
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	forida Statutes, this Florida Profit Corporation adopts the following amendment	ent(s) (
A. If amending name, enter the new name of th	he corporation:	
US CARE 7	TEAM, INC. The new	ט
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)	sable: 225 Glenbrian Cin	2
(, , , , , , , , , , , , , , , , , , ,	<u> </u>	
	Durana BEARL FL 3211	121
	DAYTONA DEATH, 1 - 2211	7
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	E BOX)	
·	0	
		T
D. If amending the registered agent and/or reg	ristered office address in Florida, enter the name of the	
new registered agent and/or the new registe		I
SY 8 4 4	in the second of	
Name of New Registered Agent		
•	•	J
	(Florida street address)	,
New Registered Office Address:	, Florida (City) (Zip Code)	
	(Zip Code)	
	·	
New Registered Agent's Signature, if changing	Registered Agent:	
I hereby accept the appointment as registered age	ent. I am familiar 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:

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.

X Change	PT	John De	<u>oe</u>							
X Remove	<u>v</u>	Mike Jo	ones							
X Add	<u>sv</u>	Sally Si	mith ·			•			,	
Type of Action (Check One)	Title	<i>.</i> *	<u>Name</u>	•	• .			<u>Addres</u> s		
1) Change	<del></del>	·	, <del>-</del>		· · · · · · · · · · · · · · · · · · ·					
Add										
Remove										
2) Change	· 	_					•			·
Add									<u> </u>	
Remove									·	<del></del>
3) Change					<del></del>					
Add										
Remove										
4) Change										
Add			• • • • • • • • • • • • • • • • • • • •							
Remove										
5) Change	_			<u>.</u>				<u></u>		
Add										
Remove										
6) Change		_	<del></del>				-			
Add									,	
TEHIOAE										

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
······································	
······································	
	<u> </u>
F. If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

The date of each amendment(s) adoption:
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 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 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 OCTOBER 15, 2012  Signature Rule Dure
(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)  Robert J, Sherman
(Typed or printed name of person signing)  OUTHOR DIRECTOR  (Title of person signing)