## P12000088992

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
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MAY 22 2013 R. WHITE 13 MAY 20 AM II: 4
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## **COVER LETTER**

TO: Amendment Section

**Division of Corporations** 

NAME OF CORPORATION: At Your Service Elder Helpers, Inc. DOCUMENT NUMBER: P12000088992 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Lisa Miller Name of Contact Person At Home Elder Helpers, Inc. Firm/ Company 1617 San Damian Rd Address Tallahassee, FL 32303 City/ State and Zip Code LDMiller10@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:  $at \, (\frac{850}{\text{Area Code}}) \, \frac{556\text{-}8983}{\text{\& Daytime Telephone Number}}$ Lisa Miller Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & ■\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) 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

FILED

13 MAY 20 AM II: 46

	of		ZU AM 11-40	
At Your Service Elder Helpe	ers, Inc.	"SECRETA	RY OF STATES	
(Name of Corporation as curi	rently filed with the Flor	rida Dept. of State) LAHA	22EE*LEOMDA	
P12000088992				
(Document Nu	mber of Corporation (if k	nown)		
ursuant to the provisions of section 607.1006 s Articles of Incorporation:	, Florida Statutes, this <i>Flo</i>	orida Profit Corporation ac	lopts the following	amendment
. <u>If amending name, enter the new name o</u> At Home Elder Helpers, Inc.			7	The new
name must be distinguishable and contain in "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "Co	". A professional corpora		
B. Enter new principal office address, if ap Principal office address MUST BE A STREE		n/a		
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		n/a		
. If amending the registered agent and/or	registered office address	s in Florida, enter the nan	ne of the	
new registered agent and/or the new reg				
Name of New Registered Agent n/a	<b>3</b>			
	(Florida street	address)		
New Registered Office Address: n/8	(City)	, Florida_	(Zip Code)	
	(Cuy)		(Lip Code)	
New Registered Agent's Signature, if chang	ing Registered Agent:			
hereby accept the appointment as registered		h and accept the obligation.	s 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. Nally 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 Ada.

Example: $\underline{X}$ Change	<u> PT</u>	John Doe		
X Remove	$\Sigma$	Mike Jones		
$\underline{X}$ Add	$\underline{SV}$	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name		Address
1)Change	<u></u>	n/a		
Add		•		
Remove				
2) Change		n/a		
Add				
Remove		n/a		
3 ) Change		117 (4		
Ada				
Remove				
4) Change		n/a		
Add				
Remove				····
5) Change		n/a	<u> </u>	
Add				
Remove				
6) Change		n/a	<del> </del>	
Add				
Remove				

<ol> <li>If amending or adding additional Arti (Attach additional sheets, if necessary).</li> </ol>	<u>cles, enter change(s) here</u> : (Be specific)
n/a	~ ··ry/
1/4	
. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
n!a	
,, ta	

The date of each amendment(s	adeption: Way 17, 2013
Effective date if applicable:	May 17, 2013
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s).
"The number of votes o	ast for the amendment(s) was/were sufficient for approval
hy	·
	(voting group)
action was not required.	adopted by the incorporators without shareholder action and shareholder 17, 2013
Signature	Sis D. Who
(By	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court officed fiduciary by that fiduciary)
	Lisa D. Miller
	(Typed or printed name of person signing)
	CEO
	(Title of person signing)