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R. WHITE

## **COVER LETTER**

TO: Amendment Section Division of Corporations

	<sub>RATION:</sub> Bay Area H		vices Inc
DOCUMENT NUM	<sub>BER:</sub> P1300002261	7	
The enclosed Articles	of Amendment and fee are se	ibmitted for tiling.	
Please return all corre	spondence concerning this ma	uter to the following:	
	Alexis Arteaga		
		Name of Contact Person	<u>.                                  </u>
	Bay Area Home	Health Services	Inc
		Firm/ Company	
	2713 W. Sligh Av	enue Suite 4	
		Address	
•	Tampa, FL 33614	4	
	•	City/ State and Zip Code	2
bay	/areahhs@gmail.d	com	
<u></u>	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Alexis Artea	ja	<sub>at (</sub> 813	, 735-0137
Name	of Contact Person	Area Code & Daytime Telephone Numb	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:
☐ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Divi P.O	Bing Address Indiment Section Ision of Corporations I Box 6327 I Box 6327 I Box 6327	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building Secutive Center Circle

## Articles of Amendment to Articles of Incorporation

FILED

14 JAN 24 PH 12: 55

## Bay Area Home Health Services Inc

SECRETARY OF STATE LALE AHASSEE, PLORIDA

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporatio	n (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, t its Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	Thenew
name must be distinguishable and contain the word "corpord "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association," or the abbreviatio	r "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	2713 W Sligh Ave
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Tampa, FL 33614
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2713 W Sligh Ave
	Tampa, FL 33614
D. If amending the registered agent and/or registered office a	ddress in Florida, enter the name of the

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

(Florida street address)

(City)

, Florida<sub>.</sub>

(Zip Code)

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 = ChiefExecutive 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	D'11°	Luba Duu			
	PT	<u>John Doc</u>			
X Remove	<u>V</u>	Mike Jones			
X Add	$\underline{SV}$	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address		
I) Change	V	Juan M. Limas	14903 Glasgow Ct		
✓ ∧dd			Tampa, FL 33624		
Remove		•	-		
2) Change	CEO	Alexis Arteaga	3119 W. Sligh Ave		
Add			Tampa, FL 33614		
Remove		•			
3) Change					
Add		•			
Remove					
4) Change					
Add					
Remove					
5) Change		·			
Add					
Remove					
6) Change		_ ·	<u> </u>		
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If amending or adding add (Attach additional sheets, if	necessary). (Be spec	cific)		
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If an amendment provides provisions for implement	for an exchange, rec	lassification, or cand	cellation of issued share	res,
(if not applicable, indi	eate N/A)	The Continue in the	e amendment Roem	
1% Alexis Arteaga				
9% Juan M. Limas	•			
570 Oddir W. Elinas		•	•	
			,	
			,	
			,	

The date of each amendmen date this document was signed	t(s) adoption: January 21, 2014	if other than th
Effective date if applicable:	 January 21, 2014	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	re adopted by the shareholders. The number of votes east for the amendment(s) are sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of vote.	s east for the amendment(s) was/were sufficient for approval	
by	· · · · · · · · · · · · · · · · · · ·	
	(voting group)	
Lfhe amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
lon	uary 20, 2014	
. Dated Salt	uary 20, 2014	
07		
Signature	By a director president or other officer – if directors or officers have not been	
So	elected by an incorporator – it in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Alexis Arteaga	
	(Typed or printed name of person signing)	
	Chief Executive Officer	
	(Title of person signing)	