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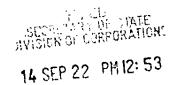
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: INDEPENDE	NT ACCESS LIVIN	G SOLUTIONS INC		
DOCUMENT NUMBER:					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this mat	ter to the following:			
	ULRICK GERMA	IN			
	······································	Name of Contact Person			
	INDEPENDENT ACCESS LIVING SOLUTIONS, INC				
		Firm/ Company			
4815 E BUSCH BLVD SUITE 203-B					
		Address			
	TAMPA, FL 3361	7			
		City/ State and Zip Code)		
ام ما:	an and anta accadi:	ina@amail aam			
ina	ependentaccessli				
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
ULRICK GERMAIN		_{at (} 813	270-6371		
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 & Certificate of Status	□\$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		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



INDEPENDENT ACCESS LIVING SOLUTIONS, INC

(Name of Corporation as currently filed with the Florida Dept. of State) (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: 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." 4815 E BUSCH BLVD B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) SUITE 203-B **TAMPA, FL 33617** 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: N/A Name of New Registered Agent (Florida street address) N/A New Registered Office Address: Florida (City) 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. 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.

Example:	p.m					
X Change	<u>PT</u>	John Doe				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	Address			
I) Change	Р	ESTHER TERNIVAL	4815 E BUSCH BLVD			
Add			SUITE 203-B			
Remove			TAMPA, FL 33617			
2) Change	PST	ULRICK GERMAIN	4815 E BUSCH BLVD			
Add			SUITE 203-B			
Remove			TAMPA, FL 33617			
3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add			· ————————————————————————————————————			
Remove						

/A	(Be specific)
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	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an analysis in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	
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The date of each amendment this document was signed		SPECIAL NEWS	<u>GRPARATIONS</u>	, if other than the
_	9/16/2014	14 SEP 22	PM 12: 53	
	(no	o more than 90 days after amendment file	date)	
Adoption of Amendment(s)	(<u>CHECI</u>	K ONE)		
The amendment(s) was/we by the shareholders was/w		eholders. The number of votes cast for thoval.	e amendment(s)	
		areholders through voting groups. The fol up entitled to vote separately on the amer	_	
"The number of votes	s cast for the amendme	ent(s) was/were sufficient for approval		
·by	(voting)	group)		
The amendment(s) was/we action was not required.	re adopted by the boar	rd of directors without shareholder action	and shareholder	
The amendment(s) was/we action was not required.	re adopted by the inco	rporators without shareholder action and	shareholder	
Dated_09/	16/2014			
Signature _	He	withing		
		t or other afficer — if directors or officers rator — if in the hands of a receiver, truste		
	ppointed fiduciary by		e, or other court	
	ULRICK GE	ERMAIN		
		(Typed or printed name of person sign	ing)	
	PST			
		(Title of person signing)		