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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Amend

MAY 0 9 2017 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: CHANDYANE BA	ASE CARE CORP			
DOCUMENT NUMBE					
	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this mat	tter to the following:			
P	ADRON, GUIANEYA				
_		Name of Contact Person	1		
C	CHANDYANE BASE CARE CORP				
		Firm/ Company			
1	2401 W OKEECHOBEE RI	D LOT 268			
	<u>.</u>	Address			
<u> </u>	IIALEAH GARDENS, FL 3	3018	<u> </u>		
		City/ State and Zip Code	2		
chandy	ane@gmail.com				
	E-mail address: (to be us	ed for future annual report	notification)		
For further information of GUIANEYA PADRON	concerning this matter, pleas		380-5398		
Name of Contact Person		at (Area Co	380-5398 de & Daytime Telephone Number		
	the following amount made p				
■ \$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)		
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 tassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

CHANDYANE BASE CARE CORP

orporation (if known)
•
orida Profit Corporation adopts the following amendment(s)
The new "company," or "incorporated" or the abbreviation ". A professional corporation name must contain the 4."
2017 HAY
s in Florida, enter the name of the
address)
, Florida
(y) (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 = 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: X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check Onc)	<u>Title</u>		Name	<u>Addres</u> s
1)Change	S		KLEINY REYES	12401 W OKEECHOBEE RD
x Add				LOT 268
Remove				HIALEAH GARDENS, FL 33018
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				S
4) Change				
Add				
Remove				
5) Change		_		-
Add				
Remove				
6) Change				
Add				
Domaria				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
,	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(у погаррнеате, таксале пля)	
<u></u> ,	

	APRIL 24, 2017		
The date of each amendment(s)			, if other than th
date this document was signed.			
Effective date if applicable:	PRIL 24, 2017		
Enecuve date <u>it applicable</u> .	(no more than	90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the appli Department of State's records.	icable statutory filing requirements, t	his date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The sufficient for approval.	e number of votes cast for the amenda	nent(s)
		rough voting groups. The following so vote separately on the amendment(s)	
	ast for the amendment(s) was/we	• •	
by	(voting group)	,,	
	(voting group)		
action was not required. The amendment(s) was/were a		s without shareholder action and share hout shareholder action and sharehold	
action was not required.			
APRIL 2 Dated	4, 2017		
Signature			
selec		cer - if directors or officers have not the hands of a receiver, trustee, or other)	
	GUIANEYA PADRON	gow _	
	(Typed or printed	name of person signing)	
	PRESIDENT	V	
	(Title	of person signing)	