

09/30/2032 07:08

P4568 P.001/002

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H14000269246 3)))



H140002692463-ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

COR AMND/RESTATE/CORRECT OR O/D RESIGN
HEALTH CARE HEALTH SERVICES INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Amend
10/11/2014

RECEIVED

14 NOV 19 PM 4:50

14 NOV 19 PM 4:50

FILED
SECRETARY OF STATE
14 NOV 19 PM 9:35

Articles of Amendment
to
Articles of Incorporation
of

H14000269248

HEALTH CARE HEALTH SERVICES INCFlorida Document Number: P14000059783

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

CHANGE ALL ADDRESSES to:12300 SW 132nd COURT unit 212
MIAMI FL 33186These articles of amendment were adopted on 11-19-14

The corporation has only one group of voting stock. This amendment was approved by the shareholders and the number of votes cast for amendment was sufficient for approval.

X

Signature

CARMEN DIAZ (P)

Printed Name and Title

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

H14000269248

FILED
14 NOV 19 AM 9:38
CLERK OF STATE
CORPORATION