## PIUDDDANS

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: YULY HO		CARE CORP
DOCUMENT NUMBER: P140000724	173	t,
The enclosed Articles of Amendment and fee are sul	omitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
JULIA PENAL\	/ER	
YULY HOME C		H CARE CORP
510 E 29 ST	Firm/ Company	
HIALEAH,FLO		
dulce-50@hotmail	City/ State and Zip Code .COM ed for future annual report	
For further information concerning this matter, please		<b>k</b>
JULIA PENALVER	at (305	926-6246
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made p	ayable to the Florida Depa	artment of State:
■ \$35 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Cliflon	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

**Articles of Amendment Articles of Incorporation** of

SER 22 PH 1:46

....**#** 

## YULY HOME HEALTH CARE CORP

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

P14000072473

(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

me must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation " ord "chartered," "professional association," o	Corp," "Inc," or "Co". A	npany," or "incorp professional corpo	Th oorated" or the abbre ration name must cont
Enter new principal office address, if appli			
rincipui ojjice uuuress <u>MOST BE ASTREET</u>	<u>ADDRESS</u> )	_k	
		,	
Enter new mailing address, if applicable:	E BOY		
(Mailing address MAY BE A POST OFFIC	<u>E BOX</u> )		· · · · · · · · · · · · · · · · · · ·
If amending the registered agent and/or re new registered agent and/or the new regist	gistered office address in F	lorida, enter the na	me of the
new registered agent and/or the new regist	gistered office address in F ered office address;		ame of the
If amending the registered agent and/or renew registered agent and/or the new regist	gistered office address in F ered office address;		ame of the
new registered agent and/or the new regist	gistered office address in F ered office address;		ame of the
	gistered office address in F ered office address;		

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 Doe		
X Remove	<u>v</u>	Mike Jones	ŧ.	
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name /		Address
1) Change		NA		
Add Remove		·		
2) Change				
Add				
Remove				
3) Change				
Remove			<b>t</b>	
4) Change				
Add				
Remove				
5) Change Add				
Remove				
6) Change	<del></del>		<u></u>	
Add				
Remove				

1.5	(Be specific)
I/A	
	•
<u>-</u> <u>-</u>	
<del></del>	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and and an and an and an analysis and analysis and an analysis
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

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The date of each amendment	(s) adoption: 09/15/2014	, if other than the
date this document was signed	•	
Effective date if applicable:	09/15/2014	
	(no more than 90 days after amendment file date)	<del>_</del> _
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wes	re adopted by the shareholders. The number of votes cast for the amendment(s) ere 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 votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated 09-1	5-2014	
Oignatut		
Se	by a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)	
	JULIA PENALVER	
	(Typed or printed name of person signing)	_
	PRESIDENT	
	(Title of person signing)	