P1400013/80

(R	(equestor's Name)		
(A	ddress)		
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(C	City/State/Zip/Phone #)		
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(Document Number)			
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: American Pride Ho	ome Care Services Corp.	
DOCUMENT NUMBI	ER: P14000073180	· · · · · · · · · · · · · · · · · · ·	···
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
		Maria A. Brito	
-		Name of Contact Person	1
	A	merican Pride Home Care S	Services Corp.
_		Firm/ Company	
		215 N John Young Pkwy	
-		Address	
		Kissimmee, Fl. 34741	
_		City/ State and Zip Code	2
	8	pcareservices215@gmail.c	om
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, please	se call:	
Julia M	. Erbiti	407	350-4991
Name of Contact Person		Arca Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
	ing Address		Address Iment Section
Divis	sion of Corporations		on of Corporations
P.O. Box 6327 Tallahassee, FL 32314			Building Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment

Articles of Incorporation

of

American Pride Home Care Services Corp

(Name of Corporation as current	ly filed with the Florida Dept. of State)
P1400007318	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A projessional corporation name musi contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	SSE DE
	F. 20
D. If amending the registered agent and/or registered office ad	dress in Florida, enter the name of the
new registered agent and/or the new registered office addre	Maria A. Brito
Name of New Registered Agent	ivialia A. Billo
(Florida	street address)
·	. Florida
New Registered Office Address:	(City) (Zip Code)
	(-1)
Age	ont.
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	ir with and accept the obligations of the position.
The state of the s	
Signature of Nev	w 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.

Mike Jones, V as Remo	ve, and Sall	ly Smith, SV as an Aaa.	
Example: 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)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	DP	Maria A. Brito	215 N John Young Pkwy
v			Kissimmee, Fl 34741
Add			
Remove			
2) Change	DP	Octavio J Cruz Martinez	215 N John Young Pkwy
, Add			Kissimmee, Fl 34741
x Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
Kemove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

). (Be specific)
	the second second second
an amendment provides for an ex	xchange, reclassification, or cancellation of issued shares,
rovisions for implementing the ar	mendment if not contained in the amendment itself:
an amendment provides for an exrovisions for implementing the ar (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:
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rovisions for implementing the ar	mendment if not contained in the amendment itself:

	12/06/2018	
The date of each amendment(s) adoption: late this document was signed.		, if other than the
Effective date if applicable:		
	(no more than 90 days after amendmen	nt file date)
Note: If the date inserted in this block does document's effective date on the Department o		equirements, this date will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		for the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting		
"The number of votes cast for the ame	endment(s) was/were sufficient for approv	al
by	oting group)	.,,
(ve	oting group)	
☐ The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder as	ction and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action	and shareholder
12/06/2018		
Dated	TO)	
Signature .		
	esident or other officer – if directors or off corporator – if in the hands of a receiver, t	
· ·	ry by that fiduciary)	rustee, or other court
	Maria A. Brito	
	(Typed or printed name of person signing	g)
	DP	
	(Title of person signing)	