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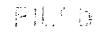
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Access Home Heal	Ith Care Inc	
DOCUMENT NUM	BER:		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Gennady Katsnelson		
		Name of Contact Person	n
	Access Home Health Care In	c	
		Firm/ Company	
	447 3rd Avenue, Suite203		
		Address	
	St Petersburg, FL 33701		
		City/ State and Zip Cod	e
	GONERATA (O) 9	mail. com	
	F-mail address: (to be us	rnail. www.sed for future annual report	notification)
_	on concerning this matter, pleas		115-1017
0 41112	/ Katchelcor !	at (at	de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or 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)
Ma	iling Address	Street	Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



16 OCT 25 PM 2: 25

Access Home Health Care, Inc		C THE BETT ASSESS TATE
(Name o	of Corporation as curren	tly filed with the Florida Dept. of State)
P14000077358		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	
n/a		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address,	if annlicable:	447 3rd Avenue North, Suite 203,
(Principal office address MUST BE A S		St Petersburg, FL 33701-3245
D. If amending the registered agent ar new registered agent and/or the ne		
	Gennady Katsnelson	indian-
Name of New Registered Agent	447 3rd Avenue North, S	Suite 203 2370 1
	, , , , , , , , , , , , , , , , , , ,	treet address)
New Registered Office Address:	St Petersburg	, Florida 33701
New Registered Office Address.	**************************************	(City) (Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regis.	hanging Registered Ager tered agent. I am familian	nt: r 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: 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	Address
1) X Change	P	Gennady Katnelson	447 3rd Avenue North, Suite 203
x Add			St Petersburg, FL 33701
Remove			
2) X Change	v	Marys Martinez	7914 Flowerfield Dr.
Add			Tampa, FL 33634
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
S) Channe			
5) Change			
Add			
Remove			
6) Change			
Add			
Domova			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary): (Be specific)	
Marys Martinez, formerly the President is now the Vice President. She now holds 5,000 sahres instead	of 10,000
Gennady Katsnelson is now the President and holds 5,000 shares	
The for the coporation hase been changed from 3906 Tampa Road, Suite E Oldsmar, FL, 34677 to	
447 3rd Avenue North, Suite 203, St Petersburg, FL 33701	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
n/a	

The date of each amendment		, if other than the
date this document was signed	10/17/2016	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	·
	this block does not meet the applicable statutory filing requirements, this da he Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes east for the amendment(sere sufficient for approval.	;)
	re approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholde	r
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
10/1' Dated	7/2016	
Signature _		
(E	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 cour ppointed fiduciary by that fiduciary)	t
	Gennady Katsnelson	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	