P14000079297

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PSP 12/18/19

COVER LETTER

TO: Amendment Section

Division of Corporations						
NAME OF CORPORATION: Netty's Homecare Inc.						
DOCUMENT NUMBER: P14000079297						
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.				
Please return all correspondence concerning this matter to the following:						
	Blossom Marshall					
		Name of Contact Person	1			
	Netty's Homec	are Inc.				
		Firm/ Company				
	3338 nw 22nd	st				
	, , , , , , , , , , , , , , , , , , ,	Address				
	Lauderdale La	kes, FI 33311				
		City/ State and Zip Code	3			
nottychomocoro@amoil.com						
nettyshomecare@gmail.com E-mail address: (to be used for future annual report notification)						
is-mail address. (to be used for future aimdal report normeactor)						
For further information concerning this matter, please call:						
Blossom M	1Arshall	at (954	309-6858			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:						
S35 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)			
Mailing Address Amendment Section Street Address Amendment Section						
All	ienament decrion	Amend	ment section			

Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Articles of Amendment

to
Articles of Incorporation of

FILED.

	01			1.1.
Netty's Homecare Inc	C.	2814 DE	EC 15 PH 3:	4
(Name of Corporation as	currently filed with the Flori	da Dept. of State).	IN OF SIA	ĪĒ.
P14000079297			HÄSSEE, FLOR	IUA
(Documer	nt Number of Corporation (if kn	own)		-
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Flo</i>	rida Profit Corporation	adopts the followin	g amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
				The new
name must be distinguishable and continuous. "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa B. Enter new principal office address, (Principal office address MUST BE A S C. Enter new mailing address, if applia (Mailing address MAY BE A POST of the continuous address address MAY BE A POST of the continuous address a	ation "Corp," "Inc," or "Co" tion," or the abbreviation "P.A if applicable: TREET ADDRESS)	'. A professional corpo		
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent	w registered office address: Blossom Marshall		nme of the	-
	3338 Nw 22nd	ડા	_	
	(Florida street d	•		
New Registered Office Address:	Lauderdale Lak	.es, Florid	_a 33311	_
	(City)		(Zip Code)	

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

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	PT	John Doe				
X Remove	<u>v</u>	Mike Jon	<u>es</u>			
X Add	<u>sv</u>	Sally Smi	Sally Smith			
Type of Action (Check One)	Title	1	<u>Name</u>	Address		
1) Change	VP		Robert A Marshall Sr	3338 nw 22nd st		
Add				Lauderdale lakes		
Remove				FI 33311		
2) Change		 -		<u> </u>		
Add						
Remove						
3) Change						
Add						
Remove				_,		
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change	<u></u>		· · · · · · · · · · · · · · · · · · ·			
Add						
Remove						

acıı uuunıonai sneets	, if necessary). (Be sp	recific)		
n amendment provi ovisions for implem (if not applicable, i	des for an exchange, renting the amendment	eclassification, or c	ancellation of issue the amendment its	d shares, elf:
			1.373	
			P	
			(

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: 12/8/14	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 12/8/14	
Signature Blone Mall	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Blossim Mars Hall (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Slow Moll Presiden	t
(Title of person signing)	