P14000088011

(Re	questor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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211-15

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI			e Solutions, Inc.		
The enclosed Articles of Ar	mendment and fee are su	bmitted for filing.			
Please return all correspond	dence concerning this mat	tter to the following:			
An	tonio A. Marre	ro			
		Name of Contact Person	n		
Co	mprehensive H	Home Care Solu	itions, Inc.		
		Firm/ Company			
21	2161 Palm Beach Lakes, Blvd., Ste. 315				
		Address			
We	est Palm Beach	n, FL 33409			
		City/ State and Zip Cod	e		
compr	ehensivehome	caresolutions@	amail com		
Compi		sed for future annual report	•		
		ou to take tempor	, inclinion,		
For further information con	cerning this matter, pleas	se call:			
Antonio A. Marrero		a _{t (} 305	202-3676 de & Daytime Telephone Number		
Name of Co	ntact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the	following amount made p	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fec	□\$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		Street	Address		
	ent Section	Amendment Section			
	of Corporations		on of Corporations		
P.O. Box Tallahass	6327 ee, FL 32314		i Building Executive Center Circle		
		2.7()1 L			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SECRETARY OF STATE BIVISION OF CORFORATIONS

Comprehensive Home Care Solutions, Inc. 15 MAR -9 AM 11: 1 1 (Name of Corporation as currently filed with the Florida Dept. of State) P14000088011 (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 its Articles of Incorporation: A. If amending name, enter the new name of the corporation: NOT APPLICABLE name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." NOT APPLICABLE B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: NOT APPLICABLE (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: NOT APPLICABLE Name of New Registered Agent (Florida street address)

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

(City)

, Florida

(Zip Code)

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 Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Р	Antonio A. Marrero	2161 Palm Beach Lakes Blvd.
Add			Suite 315
Remove			West Palm Beach, FL 33409
2) Change	Р	Alberto Sifredo	2161 Palm Beach Lakes Blvd.
Add			Suite 315
Remove			West Palm Beach, FL 33409
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			WB. 6 *
Remove			

(Attach add	L. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)						
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provision (if no	ns for implen	vides for an ex- nenting the an indicate N/A)	change, reclassif endment if not	fication, or canc contained in the	ellation of issue amendment its	d shares, elf:	
						<u>-</u>	
			· · · · · · · · · · · · · · · · · · ·				
			·				

The date of each amendment(s) adoption	FILLU	, if other than the
date this document was signed.	SPECKETARY OF STATE OF VISION OF CORPORATIONS	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more man 20 days after unertainen fre date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the amendment(s) t for approval.	
	by the shareholders through voting groups. The following statement 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 action was not required.	y the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by action was not required.	y the incorporators without shareholder action and shareholder	
Dated 02/27/2014		
Signature	Latt!	
selected, by a	president or other officer – if directors or officers have not been in incorporator – if in the hands of a receiver, trustee, or other court uciary by that fiduciary)	
	nio A Marrero	
Anto	(Typed or printed name of person signing)	
Drae	ident	
1163	(Title of person signing)	
	t i tile of bergon signing)	