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Florida Department of State Division of Corporations

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COR AMND/RESTATE/CORRECT OR O/D RESIGN VITA ADULT DAY CARE INC

> Certificate of Status Certified Copy 02 Page Count \$35.00 Estimated Charge

> > **JUL 1 4 2015**

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H15000170561

| Articles | of | Amendment |
|----------|----|------------|
| | | * - |

to

| Articles of Incorporation | | | | | |
|---|---------------|---|--|--|--|
| VITA ADULT DAY CARE | INC | | | | |
| Florida Document Number: P15000014943 | | | | | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation following amendment(s) to its Articles of Incorporation: | on adopts the | > | | | |
| Change Corp name to: | | * | | | |
| | | | | | |
| La Dolce Vita Adult Day Care | inc | · | | | |
| | 15 JUL | SHORE | | | |
| | 13 M | 25.50 25.50 15.50 | | | |
| These articles of amendment were adopted on 7 13 15 | 07 | HE A | | | |
| The corporation has only one group of voting stock. This amendment was approved by the shareholders votes cast for amendment was sufficient for approval. | and the numb | ær of | | | |
| Signature | | | | | |
| Hotonio Gonzalez (†) Printed Name and Title | | | | | |

Signature of New Registered Agent, if changing

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.