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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: ANNE'S COMPA	NION SERVICES INC			
DOCUMENT NUMBI					
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this mat	ter to the following:			
Ŋ	JIRIAM TORRES ACEVEI	00			
_		Name of Contact Person	1		
<u> </u>	MTA OF OVIEDO FINANCIAL SERVICES INC				
_		Firm/ Company			
2	2572 ALOMA AVENUE SUITE 1072				
-		Address			
(OVIEDO, FLORIDA 32765				
		City/ State and Zip Code)		
AIDE	CODDECO AO COM				
MIRE	CORRES@AOL.COM	ed for future annual report	notification)		
	E-mair address. (to be us	ed for future annual report	понтсацову		
For further information	concerning this matter, pleas	e call:			
MIRIAM TORRES ACEVEDO		407	977-9230		
Name of Contact Person		at (Area Coo	977-9230 de & Daytime Telephone Number		
Enclosed is a check for t	the following amount made p				
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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)		
Amen Divisi P.O. I	ng Address dinent Section on of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301		

Articles of Amendment to Articles of Incorporation of

FILED

2018 SEP 27 PM 2: 35

ANNE'S COMPANION SERVICES INC

(Name of Corporation as currently filed with the Florida Dept. of State ELRETARY OF STATE TALLAHASSEE, FL P15000021747 (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: 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 "PA." 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) 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: Name of New Registered Agent (Florida street address) New Registered Office Address: 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	n Doe			
X Remove	<u>Y</u> <u>Mik</u>	<u>V</u> <u>Mike Jones</u>			
<u>X</u> Add	<u>SV</u> <u>Sall</u>	SV Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) Change	VP	Kalim Marjory	1194 Gulfstar dr		
Add			winter springs, tl 32708		
Remove					
2) Change	VP	Gerry Lou Kenall	2667 Aloma Oaks Drive		
Add Add			Oviedo, fl 32765		
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
51 Change	<u> </u>				
Add					
Remove					
6) Change					
Add					
_ Remove					

famending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
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Sagarmandarant manidas Conservation	
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
<u> </u>	

	September 19, 2018	:c .i .i .i
The date of each amendment date this document was signed		, if other than the
ame talls abetiment vita signed	September 19, 2018	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this dat he Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	re adopted by the shareholders. The number of votes east for the amendment(s ere sufficient for approval.)
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):	थ
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	··	
	(voting group)	
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wel action was not required.	re adopted by the incorporators without shareholder action and shareholder	
	mber 19, 2018	
Dated	Anna Bailletia	
Signature	by a director, president or other officer – if directors or officers have not been	
Sc	elected, by an incorporator - if in the hands of a receiver, trustee, or other court	
aŗ	opointed fiduciary by that fiduciary)	
	Anne Barlatier	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	