## P150006886

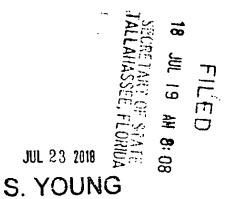
(Red	questor's Name)		
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: MORNING STAR	ADULT DAY CARE CEN	TER II CORP	
DOCUMENT NUMBI	P15000068886			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
		PAULA M RODRIGUI	ΞZ	
-		Name of Contact Person	<u> </u>	
	MORNING STAR ADULT DAY CARE CENTER II CORP			
-		Firm/ Company		
	13208 SW 8TH STREET			
-	Address			
		MIAMI, FL 33184		
-		City/ State and Zip Code	<u></u>	
	concerning this matter, please			
PAULA M RODRIGUEZ  Name of Contact Person		at (305	) 905-5208 de & Daytime Telephone Number	
	the following amount made			
■ \$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)	
Ame Divis P.O.	ing Address indment Section sion of Corporations Box 6327 hassee, FL 32314	Amenc Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle	

Tallahassee, Fl. 32301

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation

of

## MORNING STAR ADULT DAY CARE CENTER II CORP

(Name of Corporation as currently	filed with the Florida Dept. of State)
P1500006	58886
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>FI</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
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: (Mailing address MAY BE A POST OFFICE BOX)	18 JUL
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:  Name of New Registered Agent	ss in Florida, enter the name of the
(Florida stree	i address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	

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>	<u>Name</u>	<u>Addres</u> s
1) Change	Τ	LISETT VIERA	13208 SW 8TH STREET
Add			MIAMI, FL 33184
X Remove			
2) Change	_ <del></del>		
Add			<u> </u>
Remove			
3) Change		<del></del>	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles Attach additional sheets, if necessary). (E	e specific)			
<del></del> -				
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If an amendment provides for an exchang provisions for implementing the amendr	<u>e, reclassification, c</u> ient if not contained	<u>r cancellation of E</u> l in the amendm <u>en</u>	ssued shares, it itself:	
(if not applicable, indicate N/A)		•		
	<del></del> _			
-	-			
	<u>-</u>			

	06/01/2018	
	(9) 11# -   11 - 11 - 11 - 11 - 11 - 11 - 1	_, if other than the
date this document was signed		
Effective date <u>if applicable</u> :	06/01/2018	
Effective date <u>if applicable</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this date will r he Department of State's records.	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.	
☐ The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
	s east for the amendment(s) was/were sufficient for approval	
bv	(voting group)	
,	(voting group)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
JUNI Dated Signature	E 21 2018	_
(I s	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 court ppointed fiduciary by that fiduciary)	
	PAULA M RODRIGUEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	