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## COR AMND/RESTATE/CORRECT OR O/D RESIGN

## DIVERSE HOME CARE SERVICES INC

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## Articles of Amendment Articles of Incorporation

/2018/WED 01:10 PM		FAX No.	<b>3</b> 00
			A CONTRACTOR
			1
	Articles of A	mendment	
	Articles of Inc	corporation	
VERSE HOME CARE SERVICES	INC		· · · · · · · · · · · · · · · · · · ·
(Name	of Corporation as currentl	y filed with the Florida	Dept. of State)
5000073982			
<del></del>	(Document Number o	f Corporation (if known)	
rsuant to the provisions of section 607 Articles of Incorporation:	•	Florida Profit Corporati	ion adopts the following amendma
If amending name, enter the new n	ame of the corporation:		
ume must be distinguishable und cot Corp.," "Inc.," or Co.," or the designord "chartered," "professional associations	nation "Corp." "Inc." or '	"Co". A professional co	The nevocorporated" or the abbreviation or the abbreviation or the abbreviation that the contain the c
Enter new principal office address	if applicable:	28040 NW 95 ST UNIT: 222	
rincipal office address MUST BE A	STREET ADDRESS )		
merpur office autoes arous unit			
тери буще ишты <u>тогт иг ге</u>		HIALEAH GARDEN	NS, FL 33016
	<u>lic∎ble:</u>	HIALEAH GARDEN 8040 NW 95 ST	NS, FL 33016
. Fotor new mailing address, if app	<u>lic∎ble:</u>		NS, FL 33016
. Fotor new mailing address, if app	<u>lic∎ble:</u>	8040 NW 95 ST	
C. Fotor new mailing address, if app (Mailing address MAY BE A POST)  D. If amending the registered agent a	<u>licable:</u> <u>OFFICE BOX</u> O  nd/or registered office add	8040 NW 95 ST  UNIT: 222  HIALEAH GARDEI	NS, FL 33016
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\_\_ Remove

P = President: V = Vio Executive Officer; CFC held. President, Treasu Changes should be not a change Mike Jones	its, if necessidirector title Presiden O = Chief Irer, Direct Ped in the fo	iary) le by the first letter of the office title: l; T= Treasurer: S= Secretary; D= Director; T. Financial Officer.  If an officer/director holds v	the PST and Mike Jones is listed as the V. The
X Remove	<u>v</u>	Mike Jones	
X Add	<u>.</u> \$⊻	Salty Smith	
Type of Action	Title	Name	<u>Addres</u> s
(Check One)	PST	CHANGE OF ADDRESS	8040 NW 95 ST
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Add Remove			HIALEAH GARDENS, FL 33015
2) Change			
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Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific).
<u> </u>	
If an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate NA)	endment if not contained in the amendment itself:
3 77	

The deer of week amoundment of the	07/31/2018	
The date of each amendment(s) ad date this document was signed.	option:	_, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
☐ The amendment(s) was/were appr must be separately provided for e	noved by the shareholders through voting groups. The following statement such voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fi	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopted action was not required.	oted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopt action was not required.	sted by the incorporators without shareholder action and shareholder	
07/31/2018		
Dated	ACC.	
(By a dir selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other cour: d fiduciary by that fiduciary)	-
L	EYSI M. CASANOVA	
_	(Typed or printed name of person signing)	<del></del>
P	PST	
<del></del>	(Title of person signing)	