P16000050599

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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C. GOLDEN MAR 1 4 2019

COVER LETTER .

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N: HOMI	BEST CARE	, INC	
DOCUMENT NUMBER: _	P1600	0050599		
The enclosed Articles of Ame	endment and fee are sub	mitted for filir	g.	
Please return all corresponde	nce concerning this matt	ter to the follow	ving:	
		GEORGE G	ORKA	
		Name of Co	ntact Person	1
		ROUSSEAU	GROUP, IN	С
	<u> </u>	Firm/ C	ompany	
4737 NORT OCEAN DRIVE, #306			1, #306	
		Add	ress	
	F	ORT LAUDE	RDALE, FL	33308
City/ State and			nd Zip Code	2
	info	@rousseaugro	up.com	
Ē	-mail address: (to be use	ed for future ar	nual report	notification)
For further information conce	erning this matter, pleaso	e call:		
	GEORGE GORKA	at (954	491-1800
Name of Con	tact Person	\.		de & Daytime Telephone Number
Enclosed is a check for the fo	ollowing amount made p	oayable to the l	lorida Depa	artment of State:
S35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fil Certified C (Additional enclosed)	copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building		lment Section on of Corporations Building
Tallahassee, FL 32314			2661 E	xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FII ED

HOME BEST CARE, INC

*	"	9 223	E	

(Name of Corporation as currently filed with the Florida Dept. of State) HOME BEST CARE, INC - P16000050599	1AR -4 - AM H • C
HOME BEST CARE, INC - P16000050599	
	100-10
(Document Number of Corporation (if known)	<u>"() </u>
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following Articles of Incorporation:	ng amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	_The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the e "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must word "chartered," "professional association," or the abbreviation "P.A."	abbreviation contain the
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)	
· · · · · · · · · · · · · · · · · · ·	
	<u>. </u>
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 N/A	
nume of her negative of the	
(Florida street address)	
N/A	
New Registered Office Address: , Florida (City) (Zip	Code)
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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	D	Izabella Shlapak	2881 East Oakland Park Blvd.
X Add			Fort Lauderdale, FL 33306
Remove			
2) Change	VP/D	Edward Shlapak	2881 East Oakland Park Blvd.
Add			Fort Lauderdale, FL 33306
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	·		-
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
N/A		
F. <u>If ar</u> pro	n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself:	
	(if not applicable, indicate N/A)	
N/A 		

•	January 01, 2019
The date of each amendment date this document was signed	
	January 01, 2019
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 the	his block does not meet the applicable statutory filing requirements, this date will not be listed be Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
☐ The amendment(s) was/wei must be separately provide	e approved by the shareholders through voting groups. The following statement d for each 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/we action was not required.	e 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
Dated	700les
<u>(I</u>	ya 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
	oppointed fiduciary by that fiduciary)
	Isabella Shlapak
	(Typed or printed name of person signing)
	Director
	(Title of person signing)