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(((H17000139328 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

Account Name : CORP USA

Account Number : 072450003255

: (305)634-3694

Fax Number

: (305)633-9696

R. WHITE

MAY 23 2017

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

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# COR AMND/RESTATE/CORRECT OR O/D RESIGN HAMPTON HEALTH CARE SERVICES, INC.

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5/22/2017

# 17000 139328

# HAMPTON HEALTHCARE SERVICES, INC.

# COVER LETTER

TO: Amendment Section Division of Corporations

name of corpor	ATION: HAMPTON H	EALTHCARE SERVI	CES, INC.	
DOCUMENT NUMB	EER: P16000055889 -	IRS FEINI	46-3041759	
The enclosed Articles	of Amendment and fee are so	gnille we besime		
Please return all corres	pondence concerning this me	zter to the following:		
		JAMES F. SHANNO		
		Name of Contact Person	n	
_		J.F. SHANNON		
_		Firm/ Company		
	28	SW 6th Streat - Unit	t #: 2-B	
•		Address		
	H	allandale, FL 33009	<del>9-7029</del>	
•		City/ State and Zip Cod	E	
		SHANNON67@GMA and for fixture entitle report		
For further information	concerning this matter, pleas	se call:		
James	F. Shannon	at ( <b>786</b>	)253-9050	
Name o	f Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Dopa	utuant of State:	
C \$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)	
Mailing Address		Street	Address	
	ndment Section	Amend	ment Section	
	ion of Corporations	Division of Corporations		
	Box 6327		Building	
Talta	hassee, FL 32314		xecutive Center Circle	
		Tallaha	ssoo, FL 32301	

# HAMPTON HEALTHCARE SERVICES, INC. 17 MX 22 MX 9: 52

to Articles of Incorporation 44,

4.

	EALTHCARE SERVICES, INC.
(Name of Corporation	as currently filed with the Florida Dept. of State)
· · · · · · · · · · · · · · · · · · ·	P1600 <b>605588</b> 9
(Досилен)	t Number of Corporation (If known)
tursuant to the provisions of section 607.1006, Florida St ta Articles of lacorporation:	names, this Floride Profit Corporation adopts the following amendment(s)
If amouding name, enter the new name of the corp	oration:
	The now
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp.," word "chartered," "professional association," or the abi	"corporation," "company," or "incorporated" or the abbreviation "inc," or "Co". A professional corporation name must contain the breviation "P.A."
3. <u>Enter new principal office address, if applicable:</u>	HAMPTON HEALTHCARE SERVICES, INC.
Principal office address <u>MUST BE A STREET ADDR</u>	7947 Johnson Street
	Pembroke Pines, FL 33024
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	HAMPTON HEALTHCARE SERVICES, INC.
	7947 Johnson Street
	Pembroke Pincs, FL 33024
<ol> <li>If amounting the registered agent and/or registered new registered agent and/or the new registered off</li> </ol>	office address in Florida, enter the name of the
Nume of New Registered Agent	Tammy D. Hampton
	7947 Johnson Street
	(Florida street address)
New Registered Office Address:	Pembroke Pinas Florida 33024 (City) (Zip Code)
New Registered Avent's Signature, if changing Regist hereby accept the appointment as registered agent. I a	ared <u>Azent:</u> un familiar with and accept the obligations of the position.
Eletronic 61	gnature See Affidavit Attached Hereto
•	TDH
Signate	ere of New Registered Agent, if changing

# Document Number: P16000055889 ------ IRS-FEIN: 46-3041759

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 recessary)

(Attach additional sheets; if recessary)

Please upte the officeridirector 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

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief

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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 Y. 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.

X Change	PT John I	<u>Doe</u>	
<u>X</u> Remove	V Mike	Iones	
X Add	SY Sally	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP	Sylvia Forguson	16315 NW 23rd Court
Add			Miami Gardens,
X Remove			Florida 33054
2) Change	<u> </u>	Tammy D. Kampton	605 Ives Dairy Road
Add	•		Suite G-102
X Remove			Miami, FL 33179
3 ) Change	PSTD/CEO	Tammy D. Hampton	7947 Johnson Street
X_Add			Pembroke Pines,
Remove			Florida 33024
4) Change	SECR	Sheryl Hampton	2280 NW 181 Street
Add			Miami Gardens,
_X_Remove			Florida 33056
5) Change	V/AS/AT/D	Monica M. Hampton	7947 Johnson Street
_X_ Add			Pembroke Pines,
Remove			Floride 33024
6)Change	V/AS/AT/D	Melissa M. Hampton	7847 Johnson Street
X Add			Pembroke Pines,
Remove			Florida 33024

Page 2 of 4

#### Document Number: P16000055889 ------ IRS-FEIN: 46-3041759

If amending the Officers and/or Directors, enter the ritie and name of each officer/directus being removed and ritte, name, and address of each Officer andlor Director being added:

(Attach additional sheets, if necessary)

Placest 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 Salty Smith, SV as an Add.

X Change	ውጥ	John Don	
_	PT	John Doe	
X Remove	¥	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
i) Change	D	Sheryl Hampton	2280 NW 181 Street
X Add			Miami Gardens,
Remove			Florida 33058
2)Change	D	Janice Hameed	4876 Federal Blvd.
X Add			San Diego, CA 92102
Кеточе			
3)Change	D	J.F. Shannon	28 SW 8th Street
X Add			Unit #: 2-B
Remove			Hallandale, FL 33009
4)Change	D	Amoenah Johnson, RN	4608 Prewitt Ranch Rd
X Add			Kil <del>loo</del> n, TX 76549
Remove			****
5)Change	D	Sr. Pastor, Sonja Carter	4015 NW 17th Ave.
X Add			Miami, FL 33142
Remove			
6)Change			<u> </u>
Add			
Remove			

Page 2 of 4

#### Article Of Amendment to Articles Of Incorporation

Document Number: P16000055889 ----- IR5 FEIN: 46-3041759

# HAMPTON HEALTHCARE SERVICES, INC.

है, Amading or adding additional Articles, enter change(s) here: ARTICLE मा - - PURPOSE

The purpose for which the corporation is organized is: To Render Healthcare Services, such as, Private Nursing, Social Assistance Where Needed, Medical Supplies, and, or, Equipment. No Inventory will be kept on premises, as products of a physical nature will be drop shipped, outsourced, or, sub-contracted to outside suppliers. This is A Service Oriented Business, with all of it's activities adhering to the rule of law and required guidelined.

<u>ARTICLE III - - Cont'd.</u> Amendment: The Ultimate Business Goal is to begin Servicing Medicare, and Medicade With Full Fledged Contractual Agreements as listed below:

#### Re: CONTRACTS

- (1) PERSONAL CARE
  - Attendance Care
  - Companion Caro
  - Assistance Living
- (2) APD AGENCY FOR PEOPLE /W/ DISABILITIES
  - Personal Care / Skilled & Unskilled / Medical Walvera
- (3) TBI TRAUMATIC BRAIN INJUIRY
  - Skilled & Unskilled Nursing
- (4) PAC PROJECT AIDS CARE
  - Sub-divided
- (5) BA BEHAVIOR ANALYSIS
  - . Agos: 0 21yrs Old / By: Lic. Certified Social Worker
- (6) IP INDEPENGENT NURSING
  - · LPN , OR, RN

# PENDING

(7) GMS - GHILDREN MEDICAL SERVICES
- Healthy Start

F. Manataged	ment provides	Isonhex	change, reclassificati	on or cancellation
Magued	<u> </u>			t if not contained in
hio amendment	Itself.		, ,,,,,	

ARTICLE IV: (Amendment - Shares Of Stock)

PLEASE SEE STOCKHOLDERS LISTING / NEXT PAGE

02\55\501\ T6:3\ 302633666 CORP USA CORP USA PAGE 06\08

#### **Articles of Amendment**

to

#### Articles of Incorporation

Document Number: P16000055889 ----- IRS FEIN: 46-3041759

# HAMPTON HEALTHCARE SERVICES, INC.

# 

F. If amondment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amondment if not contained in the amondment itself.

# REMOVE ! AMENDMENT:

REMOVE The 1,000,800 (one million) shares of Stock the Corp. originally authorized to leave.

ADD ( AMENOMENT:

#### ARTICLE IV: ... Shares Of Stock

The number of shares the corporation authorized to issue is: 20 (twenty) Shares Of Common Stock at: \$ 50.00 (fifty dollars) per Share for a total of: \$1,000.00 (one thousand dollars). Any additional Shares must be authorized by the: PSTD / CEO.

Please see schedule below.					
STOCKHOLDERS SCHEDULE					
3608					
					_
CLASS.	HAME / RECIPIENT	UNIT COST	SHARES	% DETAI	H.
		,			
P/S/T/CEO/R	Tammy D. Hampton	\$ 50.00	1	<b>a</b> 'y	
P/S/T/CEO/R	Tammy D. Hampton	\$ 50.00	1	<b>I</b> i	
P/S/T/CEO/R	Tammy D. Hampton	\$ 50.00	1	<b>5</b> i	
P/8/T/CEQ/R	Tammy D. Hampton	<b>\$</b> 50.00	1		
P/S/T/CEO/R	Temmy D. Hampton	\$ 50.00	1		
P/S/T/CEO/R	Tammy D. Hampton	\$ 60.00	1	<b>3</b> 1	
P/S/T/CEO/R	Tanuny D. Hampton	\$ 50.00	1	<b>B</b> 1	
P/S/T/ÇEO/R	Tammy D. Hampton	\$ 50,00	1	<b>1</b> .	
P/S/T/CEO/R	Tammy D. Hampton	\$ 50.00	1	80% \$ 800.0	0
P/S/T/CEO/R	Tammy D. Hampton	\$ 50.00	1	<b>I</b> (	
P/S/T/CEO/R	Tammy D. Hampton	\$ 50.00	1		
P/6/T/CEQ/R	Tammy D. Hampton	\$ 50.00	1		
PIS/TICEOIR	Tammy D. Hampton	\$ 50,00	1		
P/8/T/CEO/R	Tammy D. Hampton	\$ 50,00	1		
P/S/T/CEO/R	Tammy D. Hampton	\$ 50.00	1	11	
P/S/T/CEO/R	Tammy D. Hampton	\$ 50.00	1		
	TOTAL	\$ 800.00	<u>16</u>	y	
V/AS/AT	Monica M. Hampton	\$ 50.00	1	1	
V/AS/AT	Monica M. Hampton	\$ 50.00	<u>_1</u>	10% \$ 100.00	9
	TOTAL	<u>\$ 100.00</u>	<u>_2</u>		
				2	
V/AS/AT	Mellssa M. Hampton	\$ 50.00	1		
V/AS/AT	Melissa M. Hampton	\$ 50.00	_1	10% \$ 100.00	)
	TOTAL	<u>\$ 100.00</u>	_2	<u> </u>	-
	GRAND TO	TALS	20 =	100% \$1,000.00	<u>1</u>

Docum	ent Number:	P1600005588	9	IRS-FEIN: 4	6 <b>-</b> 3041759
The date of each amend date this document was a		Q.F			, if other than the
Effective date <u>if applica</u>	ble: Immed		date this docum n 90 days after amends		
Note: If the date inserts document's effective date	d in this block done the Departme	oes not most the appoint of State's records	plicable statutory filing	requirements, thi	is date will not be listed as the
Adoption of Amendmen	10(4)	(CHECK ONE)			
The amendment(s) we by the shareholders w			The number of votes cas	n for the amendan	ent(s) ·
The amendment(s) we must be separately pe	s/wore approved ovided for each 1	by the shareholders to thing group entitled	firough voting groups. to vote separately on th	The following sta io amendment(s):	tement
"The number of	votes cast for the	emendment(s) was/	were sufficient for appro	oval	
ъу			·····	د. فسیت	
		(voting group)			
The amendment(s) we not require		y the board of direct	ors without shareholder	action and shareb	older
The amendment(s) we action was not require		y the incorporators v	vithout shareholder activ	on and shareholde	r
Dated	April 24, :	2017			
		**8e	o Signature Affid	avit Attache	d Hereto
Signati	re x 70	Ħ	**#lectroni	ic Signature	
·			dicer - if directors or o		960
	selected, by a		the hands of a receiver		
		Tammy	/ D. Hampton	<u></u>	
		(Typed or print	ed name of person signi	ng)	·
			PTSD / CEO		
		(Ti	tle of person signing)		

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