## P17000067817

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Almost a Daughter	Senior Relocation Service	s Inc.	
DOCUMENT NUME	ER: P17000067817			
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	Barry S. Mittelberg Esq.			
		Name of Contact Persor	)	
	Barry S. Mittelberg P.A.			
		Firm/ Company		
	10100 W Sample Road, Suite	÷ 407		
	Address			
	Coral Springs, FL 33065			
		City/ State and Zip Cod	e	
For further information	E-mail address: (to be us	sed for future annual report se call:	notification)	
Barry S. Mittelberg	-	954 ar (	de & Daytime Telephone Number	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	ertment of State:	
■ \$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)	
Amendment Section Amer Division of Corporations Divis P.O. Box 6327 Clifto		Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Almost a Daughter Senior Relocation Services Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P17000067817 (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: N/A 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 "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) N/A C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A 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: Florida (City) 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.

X Change	$\overline{\text{PT}}$	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VD	Arden Wax	c/o Barry S. Mittelberg P.A.
Add			10100 W Sample Road, suite 407
X Remove			Coral Springs, FL 33065
2) Change			
Add			
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	
	<u> </u>
	·
	<del>_</del>
F. If an amendment provides for an exchange, reclassification, or cancellation of issued provisions for implementing the amendment if not contained in the amendment itse (if not applicable, indicate N/A)	shares, lf:
N/A	
	<u> </u>

	March 4, 2019	, if other than the
The date of each amendment	(4) *****	If other than the
date this document was signed.		
Effective date if applicable:	March 4, 2019	
Effective date in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	his block does not meet the applicable statutory filing requirements, this date Department of State's records.	e will not be listed as the
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) re sufficient for approval.	
☐ The amendment(s) was/wer 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):	ıt
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	e adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated	auch 4, 2019	
Signature	Z-W	
Signature	y a director, president or other officer – if directors or officers have not been	
(8	lected, by an incorporator – if in the hands of a receiver, trustee, or other court	
SC	pointed fiduciary-by that fiduciary)	
aı	spontied fiducially by that fiducially f	
	Barry S. Mittelberg	
	(Typed or printed name of person signing)	
	Attorney for Arden Wax	
	(Title of person signing)	