## P18000056140

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

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NAME OF CORPORA	TION: Vero Beach Home	Care Inc	
DOCUMENT NUMBE			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this mat	ter to the following:	
Jι	ody Haase		
_		Name of Contact Persor	1
V	ero Beach Home Care Inc		
_		Firm/ Company	
59	932 Orangewood Lane		
_	<u> </u>	Address	· · · · · · · · · · · · · · · · · · ·
V	ero Beach Florida 32967		
_		City/ State and Zip Code	<u> </u>
<b>~</b>		-	
anna@v	rerobeachcure.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information c	concerning this matter, pleas	e call:	
Jody Haase		772	800-5665 de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made p	payable to the Florida Depa	irtment of State:
S35 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)
Amene Divisio P.O. B	ng Address Iment Section on of Corporations ox 6327 assec, FL 32314	Amend Divisio Clifton	Address Innent Section on of Corporations Building Executive Center Circle assec, FL 32301

## Articles of Amendment to Articles of Incorporation of

ero Beach Home Care Inc			
(Name o	of Corporation as currently	filed with the Florida Dept. of State)	
18000056140			
	(Document Number of C	Forporation (if known)	
arsuant to the provisions of section 607. Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation adopts the foll	owing amendment(s)
If amending name, enter the new na	ame of the corporation:		
			The new
	ation "Corp." "Inc," or "C	" "company," or "incorporated" or to". A professional corporation name to.A."	he abbreviation
Enter new principal office address,			<del></del>
rincipal office address <u>MUST BE A S</u>	TREET ADDRESS )		
			$\sim$
Enter new mailing address, if appli	icable:		Control of the contro
(Mailing address MAY BE A POST)			
			٠
			- Section V
			<u> </u>
If amending the registered agent an	id/or registered office addre	ss in Florida, enter the name of the	
new registered agent and/or the new			
Name of New Registered Agent	Jody L Haase		
Same of New Registered Agent	5932 Orangewood Lane		
	(Florida stree	a Discourse	<del></del>
	Vero Beach	1 daaress)	)47
New Registered Office Address;		, Florida 	(Zip Code)

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	Herbert H Haase	5932 Orangewood Lane
Add			Vero Beach
Remove			Florida 32967
2) Change	PTSD	Jody L Haase	5932 Orangewood Lane
X Add			Vero Beach
Remove			Florida 32962
3)Change			<u></u>
Add			<u></u>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	or adding additional A ional sheets, if necessary	y). (Be specific)	- <u>**:*</u> -		
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	<u> </u>				
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		<del></del>			
					_ <del></del> _
If an ameno	Iment provides for an e for implementing the a	vehange, reclassifier	ation, or cancella	tion of issued shar	res,
(if not	applicable, indicate N/A	)	itaineu iii the an	ienument usen.	
Α	77	•			
71					
				-	
			•	··	<u>-</u>

	December 1, 2018	
The date of each amendment(s) a date this document was signed.	deption:	, if other than the
Effective date <u>if applicable</u> :		
<del></del>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this l document's effective date on the De	slock does not meet the applicable statutory filing requirements, the partment of State's records.	his date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes east for the amendation of for approval.	ment(s)
	proved by the shareholders through voting groups. The following st 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/were ad action was not required.	opted by the board of directors without shareholder action and share	cholder
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and sharehold	ler
December Dated	1,2018	
selecte	rector, president or other officer – if directors or officers have not d, by an incorporator – if in the hands of a receiver, trustee, or othe ted fiduciary by that fiduciary)	been r court
	Jody L Haase	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	