## P8000061904

Office Use Only



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FILED

18 JUL 16 AM 9: 42

SECRETARY OF STATE
FALLSHASSEE, FLORIDA

18 JUL 15 AH 10: 42

JUL 17 2018 T SCHROEDER CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 130018 8182709
AUTHORIZATION : Spullele man
COST LIMIT : \$ 105.00
ORDER DATE: March 23, 2018
ORDER TIME : 9:24 AM
ORDER NO. : 130018-015
CUSTOMER NO: 8182709
DOMESTIC AMENDMENT FILING
NAME: HOME HEALTH SYSTEMS, INC.
EFFECTIVE DATE:
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

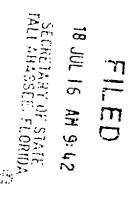
CONTACT PERSON: Emily Croft -- EXT# 62925

## Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
HOME HEALTH SYSTEMS, INC.
Enter Name of Other Business Entity
2. The "Other Business Entity" is a
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Georgia
(Enter state, or if a non-U.S. entity, the name of the country)
08/24/1989 on
Enter date "Other Business Entity" was first organized, formed or incorporated
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
HOME HEALTH SYSTEMS, INC.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date:  (The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florid Department of State.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be
listed as the document's effective date on the Department of State's records.

Page 1 of 2



Signed this		ay of	June		, 20	18	<del></del> ·	
Required Sign	ature for I	Florida Prof	it Corporation:					
Signature of Cl	mairman, V	ice Chairman McGold	Director, Officer	r, or, if I	Directors or O	fficers hav	e not beer	n selected, an
Printed Name:	Mary MCGC	HORICK	Title. Tresident	<del></del>			_	
Required Sign	iature(s) oi	behalf of C	Other Business Er	<u>tity:</u> [S	See below for	required s	ignature(s	).]
Signature:	Mary W	McGoldr	ick					
Printed Name:	Mary Mo	Goldrick		Title: _	President			
Signature:								
Printed Name:			<u>.</u>	_Title: _			<u>.</u>	
Signature:								
Printed Name:				_Title: _				
Signature:				_				
Printed Name:		=		_ Title: _		<del></del>		
Signature:							<del></del> ,	
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Signature:					<del> </del>		· · · · · · · · · · · · · · · · · · ·	
Printed Name:	<del></del>	<del>.</del> .		_Title: _				
If Florida Ger Signature of or			imited Liability I	artners	ship:			
If Florida Lin Signatures of A		_	imited Liability I	imited	<u>Partnership:</u>	·		
If Florida Lin Signature of a			<u>iy:</u> Representative.					

All others:
Signature of an authorized person.

Fees:

Certificate of Conversion:

\$35.00

Fees for Florida Articles of Incorporation:

\$70.00

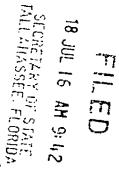
Certified Copy:

\$8.75 (Optional)

Certificate of Status:

\$8.75 (Optional)

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## ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation shall be: HOME HEALTH SY	/STEMS, INC.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
621 Lily of the Valley Drive Venice, FL 34293	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
Consulting and publications	
	,
	10 J
ARTICLE IV SHARES The number of shares of stock is:	AH 9: L2
ARTICLE V INITIAL OFFICERS AND/OR DL	RECTORS
Name and Title: Mary McGoldrick, President  Address: 621 Lily of the Valley Drive Venice, FL 34293	<del></del>
Name and Title:	Name and Title:
Address:	
Name and Title:	
Address:	Address:

da street address (P.O. Box NOT acceptable) on Service Company s Street ee, FL 32301  INCORPORATOR ess of the Incorporator is: :Goldrick of the Valley Drive FL 34293	*******	on at the place designated in
s Street  ee, FL 32301  INCORPORATOR ess of the Incorporator is:  Goldrick  of the Valley Drive FL 34293  ***********************************		on at the place designated in
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FL 34293  ***********************************		on at the place designated in
		on at the place designated in
McGoldrick	06/25/18	
Signature/Incorporator y McGoldrick	Date	FILED  18 JUL 16 AM 9: 42  SECKE JARY OF STATE TALLAHASSEE FLORIDA
	Signature/Incorporator	Signature/Incorporator Date