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(((H18000247110 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : BLALOCK, WALTERS, HELD & JOHNSON, P.A.

Account Number: 076666003611 Phone : (941)748-0100

Fax Number : (941)745-2093

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

COR AMND/RESTATE/CORRECT OR O/D RESIGN UNITED HEALTH CARE INC

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Help

P. 002

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Articles of Amendment

10

Articles of Incorporation of

2018 AUG 23 AM 6: 32

United Health Care Inc	SECRETARY OF STATE
(Name of Corporat	tion as currently filed with the Florida Depender State ASSEE, FL
P18000071828	
(Docu	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the c	orporation:
United Home Health, Inc.	The new
name must be distinguishable and contain the won "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	ord "corporation," "company," or "incorporated" or the abbreviation p," "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BC) D. If amending the registered agent and/or registered	ered office address in Florida, enter the name of the
new registered agent and/or the new registered	
Name of New Registered Agent	
	(Florida street address)
New Registered Offica Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and accept the obligations of the position.
Sigi	nature of New Registered Agent, if changing

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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	PT John	<u>Doe</u>	
X Remove	V Mike	<u>Jones</u>	
X Add	SY Sally	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1)Change			
Add			
Remove			· ·
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5)Change			
Add			
Remove			
6) Change			
Add			
Remove			

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	heets, if necessary).	(Be specific)			
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		hange reclassifics	ition, or cancellati	on of issued shar	<u>es,</u>
provisions for imp	provides for an exc plementing the ame ble, indicate N/A)	endment if not con	ntained in the ame	ndment itself:	
provisions for imp	plementing the am	endment if not cor	ntained in the ame	ndment itself:	
provisions for imp	plementing the am	endment if not cor	ntained in the ame	ndment itself:	
provisions for imp	plementing the am	endment if not cor	ntained in the ame	ndment itself:	
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provisions for imp	plementing the am	endment if not cor	ntained in the ame	ngment itself:	
provisions for imp	plementing the am	endment if not cor	ntained in the ame	ndment itself:	

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The datz of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	ila date)
(no more inan yo days igicr umenumum)	ne water
Note: If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	irements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for by the shareholders was/were sufficient for approval.	the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The inust be separately provided for each voting group entitled to vote separately on the an	following statement nendment(s):
"The number of votes cost for the amendment(s) was/were sufficient for approval	
by(voting group)	31.
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	on and strareholder
The amendment(s) was/were adopted by the incorporators without shareholder action a action was not required.	nd sharehold u
Dated 8/23/18	
Signature (By a director, president or other officer – if directors or officer selected, by an incorporator – if in the hands of a receiver, true appointed fiduciary by that fiduciary)	ers have not been stee, or other court
Michael Glismann	
(Typed or printed name of person signing)	
President	
(Title of person signing)	