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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : DBS DIEZ EUSINESS SERVICES INC

Account Number : I20170000086 Phone : (813)871-1816 Fax Number : (813)884-5920

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

Email Address:

## COR AMND/RESTATE/CORRECT OR O/D RESIGN ANYTIME HOME HEALTH CORP

Certificate of Status	0
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Page Count	04
Estimated Charge	\$35.00

FEB 2 2 2019

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## Articles of Amendment to Articles of Incorporation of

ANYTIME HOME HEALTH CORP							
(Name o	of Corporation as cu	rrently filed with the Florids Dept. of State	<u>e</u> )				
F19000007899							
	(Document Nur	iber of Corporation (if known)					
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statute	i, this Florida Profit Corporation adopts the	following amendment(s) to				
A. Hamending name, enter the new n	ime of the corporati	on:					
			The new				
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp." "Inc.	oration," "company," or "incorporated" or "Co". A professional corporation nan ition "P.A."	or the abbreviation we must contain the				
R. Enter new principal office address.	if annlicable:	11014 N DALE MABRY HWY					
(Principal office address MUST BE A S	TREET ADDRESS )	SUTTE 504 UNIT 112	SUTTE 504 UNIT 112				
		TAMPA, FL 33618	<u>≥</u> : 19				
C. Enter new mailing address, if appli (Mailing address MAY BE A POST	icable: OFFICE BOX)	11014 N DALE MABRY HWY					
	_	SUITE 504 UNIT 112					
		TAMPA, FL 33618					
D. If amending the registered agent an new registered agent and/or the ner		e address in Florida, enter the name of the	· · · · · · · · · · · · · · · · · · ·				
Nome of New Registered Agent	AIME GUERRA P	LOTO					
Manage by Man Maganga Carrier	11014 N DALE M/	<del></del>					
	(Flo	ida straet address)	· ·				
New Registered Office Address:	ТАМРА	, Florida	, Florida 33618				
		(City)	(Zip Code)				

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

Example:

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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;  $C \Rightarrow Chairman or Clerk; <math>CEO = Chic_i$  Executive Officer;  $CFO = Chic_i$  Financial Officer. If an officer/director holds more than one title, list the first letter of each offiched, 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.

<u>X.</u> Change	lòt, [t]4	<u>in Doc</u>	
X Remove	<u>V</u> <u>Mi</u>	<u>ke Jones</u>	
<u>X</u> Add	<u>SV</u> <u>Sal</u>	<u>lly Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
1) X Change	P	AIME CUERRA PILOTO	11014 N DALE MABRY HWY
Add			SUITE 504 UNIT 112
Remove			TAMPA, FL 33618
2) X Change	VP	CINTHYA PEREZ GALVEZ	11014 N DALE MABRY HWY
			SUITE 504 UNIT 112
Remove			TAMPA, FL 33618
3) Change			
. Add			
Remove			
4) Change		.,.	
Add			
Remove			4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
5) Change			
Add			
Remové			
6) Change		<del></del>	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
	<u> </u>
<del> </del>	
	· · · · · · · · · · · · · · · · · · ·
F. If an amendment provides for an exchange, reclassification, or cancellation of issued sh provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	<u>aręs.</u>

DBS	813	884	<b>592</b> 0	>>	850-	617	-6381
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P 5/5

•	02/04/2019	
The date of each amendment(s)	adoption;	, if other than t
date this document was signed.		
	2/04/2019	
Effective date <u>if applicable</u> :		<del></del>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date wi Department of State's records.	Il not be listed as t
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	
by		
•	(voting group)	
The amendment(s) was/were a action was not required.	idopted by the board of directors without shareholder action and shareholder	•
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
02/04/20	919	
Dated		
Signature		
(By	a director, president or other officer - if directors or officers have not been	
	sted, by an incorporator - if in the hands of a receiver, trustee, or other court	
	sinted fiduciary by that fiduciary)	
	AIME GUERRA PILOTO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	