## P1900000 7899

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ANYTIME HOME	E HEALTH CORP	
	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	ANGEL DIEZ		
		Name of Contact Person	יו
	DBS DIEZ BUSINESS SER	VICES INC	
	<del></del>	Firm/ Company	· · · · · · · · · · · · · · · · · · ·
	4125 W WATERS AVE		
		Address	<del></del>
	TAMPA, FL 33614		
		City/ State and Zip Cod	e
DRS	10@FRONTIER.COM		
<del></del> -		sed for future annual report	notification)
	, , , , , , , , , , , , , , , , , , ,		
For further information	concerning this matter, pleas	se call:	
ANGEL DIEZ		at ( <u>813</u>	871-1816
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status
Ame Divis P.O.	ing Address Indment Section Ission of Corporations Box 6327 Ishassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle hassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILEC

ANYTIME HOME HEALTH CORP			2019 FEB 19 AM 8
(Name)	of Corporation as currently	filed with the Florida Dept. of	State)
P19000007899			TALLAHOSSEE
	(Document Number of C	Corporation (if known)	=======================================
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>Fi</i>	<i>lorida Profit Corporation</i> adopts	the following amendment(s) to
A. If amending name, enter the new m	ame of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	aation "Corp." "Inc." or "C	o". A professional corporation	d" or the abbreviation
B. Enter new principal office address.	if applicable:	11014 N DALE MABRY HW	Ý
(Principal office address MUST BE A S		SUITE 504 UNIT 112	
		TAMPA, FL 33618	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		11014 N DALE MABRY HW	n'
		SUITE 504 UNIT 112	
		TAMPA, FL 33618	
D. 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			<del></del>
Name of New Registered Agent	AIME GUERRA PILOTO		
	11014 N DALE MABRY H	WY SUITE 504 UNIT 112	
	tFlorida stree	t address)	<del></del>
New Registered Office Address:	TAMPA	. Flo	33618 rida
	11	ily)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		th and accept the obligations of t	he position.
<del></del>	Signature of New Reg	gistered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, at 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 offic 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	AIME GUERRA 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
Add	<del></del>		SUITE 504 UNIT 112
Remove			TAMPA, FL 33618
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
	· · · · · · · · · · · · · · · · · · ·	-
P1. 18		
<del></del>		
<del></del>		
		<del></del> -
16, -1-		
f an amondment provides for an each	nange, reclassification, or cancellation of issued shares	
provisions for implementing the ame	ndment if not contained in the amendment itself:	<u>).</u>
(if not applicable, indicate N/A)		

	02/04/2019	
The date of each amendment(s) date this document was signed.	adoption:	, if other than t
	2/04/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as t
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statemen or each voting group entitled to vote separately on the amendment(s):	nt.
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
þý	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted 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 Dated	19	
1200CU		
Signature		
(By a	director, president or other officer - if directors or officers have not been	<del></del>
	ted, by an incorporator - if in the hands of a receiver, trustee, or other court	
арро	inted fiduciary by that fiduciary)	
	AIME GUERRA PILOTO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title at person signing)	