(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
,
(Decument Museless)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Fining Officer.

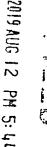
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COVER LETTER

TO: Amendment Section

Mailing Address

P.O. Box 6327

Amendment Section
Division of Corporations

Tallahassee, FL 32314

Division of Corporations					
NAME OF CORPORATION: Horida Access Care, Inc.					
DOCUMENT NUMBER: + 19000009055					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Edzard Joseph-Gabriel Name of Contact Person Horida ACCESS Coure Inc.					
Firm/ Company					
2056 Clapper Trail					
APOPKa FL 32703					
City/ State and Zip Code					
Horida acress Care @ amail, Com E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Edrard Joseph Gabriel 407 218 2571 Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$35 Filing Fee Certificate of Status \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed) \$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)					

Street Address
Amendment Section

Division of Corporations Clifton Building

Taffahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment

Articles of incorporation					
of of					
Horida Access Care, Inc.					
(Name of Corporation as currently filed with the Florida Dept. of State)					
7190000 90SS = = = = = = = = = = = = = = = = =					
(Document Number of Corporation (if known)					
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following am end men	พ(ร)ขอ				
its Articles of Incorporation:	रूक्षा इन्हरू				
A Market Control of the control of t	3 0 d				
A. If amending name, enter the new name of the corporation:	السا				
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp" "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."					
D. Francisco de Company de Compan					
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)					
Florida Access Care	-, In				
4803941205 VILABEILA Dr.					
Seloring FL 33872	-				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)					
2056 Clapper Trail					
APOPILA, FL 32703					
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	nges)				
Fland Issaid Califol					
Name of New Registered Agent total 10 Sept- Gabriel					
2056 Clapper Trail Apople(E.	JG)				
(Florida street address)					

New Registered Office Address:

New Registered Agent's Signature, if changing Registered Agent:

I 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

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> <u>J</u>	John Doc	
X Remove	<u>V</u> <u>N</u>	Mike Jones	
<u>X</u> Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP_	Lonel Gabriel	2056 Clapper Trl APOPKa, FL 32703
Add			Apopka, PL 32703
Remove			<u> </u>
2) Change			
Add			
Remove			
3) Change		 	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
6) Change			
Add			
Remove			

E. <u>If ame</u> (Attach	ding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
(Allacii	
	N/A
_	
F. <u>Ifan a</u>	nendment provides for an exchange, reclassification, or cancellation of issued shares,
<u>provi</u>	ions for implementing the amendment if not contained in the amendment itself: not applicable, indicate N/A)
(ma approxime, manuse many
	NA -
	.,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,

•	The date of each amendment(s) adoption: 7/12/19	, if other than the
	date this accuracity was pigner.	
	Effective date if applicable: 7/12/19 (no more than 90 days after amendment file date)	
	(no more than 9t) days after amendment file date)	
	Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	I not be listed as the
	Adoption of Amendment(s) (CHECK ONE)	
,·	The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
•	The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)	
	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
	☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
	Dated	
	Dated 777 77	
	Signature Signature	
	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
	appointed fiduciary by that fiduciary)	
	Edzard Joseph-Gabriel	
	(Typed or printed name of person signing)	
	tresident.	<u> </u>
	(Title of person signing)	