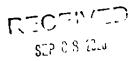
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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: FUSION HOME HEATH INC DOCUMENT NUMBER: P190000 48214
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person
Firm/ Company
7045 Clarwater Dr
Spring Hill FC 38606 City/ State and Zip Code
Garciadamaris 5 (Cychoo, Com DE-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (35), 549 4068 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Amendment Section Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curre	ently filed with the Florida Dept. of State)	
fusion Home	Health Inc	
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, t its Articles of Incorporation:	his Florida Profit Corporation adopts the follow	ving amendment(s) to
A. If amending name, enter the new name of the corporation FUSION ASSIS name must be distinguishable and contain the word "corporation." "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co"	Hed LIVING IV ""company," or "incorporated or the abbrevial A professional corporation name must con	L The new ution "Corp.," tain the word
"chartered," "professional association," or the abbreviation "P. B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	Brooksville, FC 3	Aug 34604
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		2023
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office additional and/or the new registered office and/or the new		٠
Name of New Registered Agent		_ = :_
(Florida	a street address)	9: 03
New Registered Office Address:	Florida	
Bew Registered Office Address.		ip Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famili		и.
Signature of Ne	w Registered Agent, if changing	

Check if applicable

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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>	John Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	ne <u>s</u>	
X Add	<u>sv</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)		
			 -
	<u> </u>		
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f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cance adment if not contained in the	Hation of issued shares, amendment itself:	
			<u>-</u> -
		·	

The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s) (<u>CHECK QNE</u>)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stemust be separately provided for each voting group entitled to vote separately on the amendment(s):	stement
"The number of votes cast for the amendment(s) was/were sufficient for approval by 100	
(voting group)	
Dated_8/31/2020 January Signature	
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
Damaris Garcia (Typed or printed name of person signing)	
Owner, President. (Title of person signing)	
(Thie or person signing)	