P190000 72224

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COVER LETTER -

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TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION: LILYS HOME CARE, INC. DOCUMENT NUMBER: P19000072224				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
DIANE T. PAUL Name of Contact Person				
Firm/ Company				
8940 WATERCREST CIRCLE EAST				
PARKLAND FLORIDA 33076 City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Diame Paul at 954 253 - 8153 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:				
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Street Address Amendment Section				

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment

to

Articles of Incorporation

of

LILYS HOME CARE	INC
(Name of Corporation as currently	filed with the Florida Dept. of State)
P19000072224	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Ilorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
$A \setminus M$	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "C word "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	20
$A \mid \mathcal{U}$	* 19 M
	7
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
1	¥ 171
NA	
13/11	53 E
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent PAUL	IANE T
8940 WATERO	REST CIRCLE FAST
New Registered Office Address:	PARKLAND, Florida 33016
· ·	(sup come)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	the and amount the abliquious of the position
t nereny accept the appointment as registerea agent. I am jamittar wi	ін апа ассері іне опидановк ој іне рохинов.
	70
Dine . T.	Land.
C 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, 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	Doc	
X Remove	<u>V</u> <u>Mike</u>	: Jones	
X Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	PAUL DIANET	PRES) 8940 WATERCREST CIRCLE GA
, Add	·	,	PARKLAND, FLORIDAN 330
X Remove			
2) Change Add	₽_	PAUL DIANE. T.	8940 WATERCREST CIRCLE &
Remove			FLORIDA 33076
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			
Remove			

	If amending or additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
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an amendingot provide provisions for implemen (if not applicable, irad	ting the amendment	eclassification, or cance if not contained in the :	lation of issued shares, meadment itself:	
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	ting the amendment licate N/A)	if not contained in the	meadment itself:	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	1 (C) . 1
(no more than 90 days after an	nendment file datc)
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	filing requirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of vot by the shareholders was/were sufficient for approval.	tes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting ground must be separately provided for each voting group entitled to vote separately	
"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 shareh action was not required.	older action and shareholder
The amendment(s) was/were adopted by the incorporators without shareholde action was not required.	er action and shareholder
Dated 11 1 2019 Signature	and
(By a director, president or other officer - if director selected, by an incorporator - if in the hands of a recappointed fiduciary by that fiduciary)	s or officers have not been ceiver, trustee, or other court
DiANE T. P.	Aul
(Typed or printed name of persor	a signing)
PRESIDENT.	
(Title of person signi	ng)