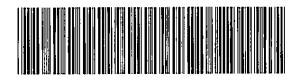
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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
	_	
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
Special instructions to	rilling Officer.	

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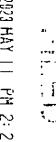
Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: E & E CARE, COR	RP		
DOCUMENT NUM	กรุงกับบานสราคา			
The enclosed Article	es of Amendment and fee are sub	bmitted for filing.		
Please return all corr	respondence concerning this mat	tter to the following:		
	Elaine Nunez			
		Name of Contact Persor	1	-
	-	Firm/ Company		_
	3425 NW 87 TER			
	·	Address		-
	MIAMI, FL 33147			_
		City/ State and Zip Code	2	
	etainenunez25@yahoo.com			
	E-mail address: (to be us	ed for future annual report	notification)	SEC SEC
For further informati	ion concerning this matter, pleas	se call:		2023 HAY II PH 2: 22 SECRETAIN OF STATE TALLAHANSEE, FL
Elaine Nunez		786 at (518-8848	- 1 m
Name	e of Contact Person		de & Daytime Telephone Numbe	示説できて
Enclosed is a check	for the following amount made [payable to the Florida Depa	ariment of State:	: 22 STATE
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
<u>M</u>	ailing Address	Street	Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahussee, FL 32314 Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

E & E CARE, CORP

(Name of Corporation a	as currently filed with the Fig	orida Dept. of State)	
P20000036260			
(Document	Number of Corporation (if kn	own)	
Pursuant to the provisions of section 607.1006, Florida Statista Articles of Incorporation:	atutes, this Florida Profit Corp	poration adopts the following	ing amendment(s) to
A. If amending name, enter the new name of the corpo	oration:		
name must be distinguishable and contain the word "corpo" Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbrevia	r "Co". A professional corp	prporated" or the abbrevial poration name must conte	The new tion "Corp" tin the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u>ESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		ter the name of the	SECRITARY OF
Name of New Registered Agent			一篇写 3
	(Florida street address)		2: 22 F STATI EE, FL
New Registered Office Address:	(Ciny)	, Florida	Codes
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	ered Agent:	·	
Signatur	re of New Registered Agent, if c	changing	<u></u>
Check if applicable The amendment(s) is/are being filed pursuant to s. 607		e e	

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 tisted 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: XChange	<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) Change	VP	Renier Garcia	3425 NW 87 TER
X Add		-	MIAMI, FL 33147
Remove			
2) Change			
Add			
Remove 3.) Change			
Add			SEORETALLAHI
Remove			RELATION
4) Change		_	
Add			PA 2:
Remove			
5) Change			m
Add			
Remove			
6) Change		_	
Add			
Remove			

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05/01/2023	
	other than th
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, this date will not be document's effective date on the Department of State's records.	oe listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and share action was not required.	holder
☐ 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	
by" (voting group)	
Dated05 - 01 - 2023	
Dated O S O S S S S S S S S S S S S S S S S	
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)	
Elaine Nunez	
(Typed or printed name of person signing)	
President — — — —	2023
ر النظر (Title of person signing)	<u> </u>

023 MAY 11 PH 2: 22