P21000032937

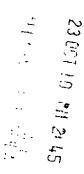
(Re	questor's Name	e)
(Ad	dress)	<u> </u>
(Ad	dress)	
(Cit	y/State/Zip/Pho	one #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity N	ame)
(Do	cument Numbe	er)
Certified Copies	_ Certificat	tes of Status
Special Instructions to	Filing Officer:	
		J. HORNE
		OCT 2 3 2023

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COVER LETTER

TO: Amendment Section Division of Corporations

Mailing Address
Amendment Section

P.O. Box 6327

Division of Corporations

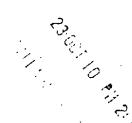
NAME OF CORPOR	RATION: FDEZ & GLEZ IN	VESTMENTS, INC.	
	BER: P21000032937		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	IRAYS MENDEZ VALDES		
		Name of Contact Person	
	MENDEZ HOME CARE & I	BEHAVIOR INC.	
		Firm/ Company	
	1330 W. 29TH ST APT 44		
		Address	
	HIALEAH, FL 33012		
		City/ State and Zip Code	2
	iraysmendez@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
IRAYS MENDEZ VA	AYS MENDEZ VALDES		325-6240
Name	at (786) 325-6240 of Contact Person Area Code & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	irtment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Street Address
Amendment Section

Division of Corporations

The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation of



FDEZ & GLEZ INVESTMENTS, INC.					
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)				
21000032937					
(Document Number	of Corporation (if known)				
ursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(
. If amending name, enter the new name of the corporation:					
IENDEZ HOME CARE & BEHAVIOR INC.	The new				
ame must be distinguishable and contain the word "corporation," Inc.," or Co.," or the designation "Corp," "Inc," or "Co". chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word				
. Enter new principal office address, if applicable:	1330 W. 29TH ST APT 44				
Principal office address <u>MUST BE A STREET ADDRESS</u>)	HIALEAH, FL 33012				
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1330 W. 29TH ST APT 44				
(Musing address MAT DE ATOST OFFICE DOA)	HIALEAH . FL 33012				
. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address					
	street address)				
(Florida					
(Florida) New Registered Office Address:	, Florida (Citv) (Zip Code)				

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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.

X Change	<u>PT</u> <u>Jo</u>	<u>hn Doe</u>	
X Remove	<u>v</u> <u>M</u>	ike Jones	
_X Add	<u>SV</u> Sa	ally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u>P</u>	FERNANDEZ, ABILIO L	1330 W. 29TH ST APT 44
Add			HIALEAH, FL 33012
X. Remove			w- <u>-</u>
2) Change	P	IRAYS MENDEZ VALDES	1330 W. 29TH ST APT 44
X Add			HIALEAH, FL 33012
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			-
Remove			
6) Change			
Add	_		
Remove			

	onal sheets, if necessar	y). (Be specific	;)			
						
						_
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-						
······································						
provisions i	ment provides for an e or implementing the a pplicable, indicate N/A	imendment if no	sification, or ca it contained in t	ncellation of issi the amendment	ued shares, itself:	
-						
				· · · · · · · · · · · · · · · · · · ·		
	 -					

The date of each amendmen date this document was signed		, if other than the
Effective date if applicable:	October 6th , 2023	
	(no more than 90 days after amendment file	date)
	this block does not meet the applicable statutory filing require he Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without sh	hareholder action and shareholder
	re adopted by the shareholders. The number of votes east for there sufficient for approval.	ne amendment(s)
	re approved by the shareholders through voting groups. The fored for each voting group entitled to vote separately on the amen	
"The number of vote.	s cast for the amendment(s) was/were sufficient for approval	
by		
. ·	(voting group)	
Octob Dated	er 6th , 2023	
Signature_		
Se	y a director, president or other officer – if directors or officers beleeted, by an incorporator – if in the hands of a receiver, trusted oppointed fiduciary by that fiduciary)	
er Nove	ABILIO L. FERNANDEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	