7/11/24, 3:05 PM

Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN

A & D HOME CARES SERVICES INC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$35.00 |

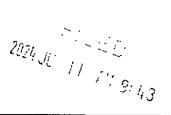
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Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation



| A & D HOME CARES SERVICES INC | 3:43 |
|--|--|
| (Name of Corporation a | as currently filed with the Florida Dept. of State) |
| P22000033651 | |
| (Document | Number of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statis Articles of Incorporation: | atutes, this Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corpo | pration: |
| name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp." "Inc.," or "chartered," "professional association," or the abbreviat B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDREST ADD | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | |
| D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent | office address in Florida, enter the name of the |
| | (Florida street address) |
| New Registered Office Address: | (City) , Florida (Ziv Code) |

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 | |
|---|--|

Check if applicable

To: Page: 4 of 6 2024-07-11 19:08:54 GMT 13053284774 From: Yanet Avila

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> 6.1.</u> | John Do | <u>)c</u> | |
|-------------------------------|--------------|-------------|-------------------------|----------------------------|
| X Remove | <u>v</u> | Mike Jo | nne <u>s</u> | |
| X Add | <u>sv</u> | Sally Sr | <u>nith</u> | |
| Type of Action (Check One) | <u>Title</u> | | Name | Address |
| I) Change | VP | | SANDRA CASTILLO CARDOSO | 558 HIALEAH DRIVE, UNIT 11 |
| X Add | | | | HIALEAH, FL 33010 |
| Remove | | | | |
| 2) Change | | _ | | |
| Add | | | | |
| Remove 3) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | | *** |
| Remove | | | | |
| 5) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | _ | | |
| Add | | | | |
| Remove | | | | |

| (Attach addillar | nal sheets, if necessary) | . (Be specific, |) | | | |
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| . If an amendme | nt provides for an exc | hange, reclassi | fication, or cance | <u>llatio</u> n of issued | shares, | |
| provisions for (if not appl | implementing the am licable, indicate N/A) | endment if not | contained in the | amendment itse | <u>lf:</u> | |
| V 11 | ,, | | | | | |
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2024-07-11 19.08:54 GMT

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From: Yanet Avila

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| To: Page: 6 of 6 |
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2024-07-11 19:08:54 GMT

13053284774

From: Yanet Avila

| 775 1 4 1 1 1 1 1 1 1 1 | 07/11/2024 | | |
|--|---|--|-------------------------------|
| The date of each amendment(s) adoption date this document was signed. | ption: | | if other than the |
| Effective date if applicable: | | | |
| | (no more than | 90 days after amendment file date) | <u> </u> |
| Note: If the date inserted in this bloc document's effective date on the Depa | ek does not meet the appirtment of State's records. | licable statutory filing requirements, this de | ate will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | | |
| ☐ The amendment(s) was/were adopte action was not required. | ed by the incorporators, o | r board of directors without shareholder acti | on and shareholder |
| ☐ The amendment(s) was/were adopt by the shareholders was/were suffi | ed by the shareholders. T | he number of votes east for the amendment(| s) |
| The amendment(s) was/were appro- must be separately provided for ea | ved by the shareholders the chivoling group entitled to | wough voting groups. The following statems o vote separately on the amendment(s): | ent |
| "The number of votes east for | the amendment(s) was/w | vere sufficient for approval | |
| ъу | (voting group) | | |
| selected, b appointed | ctor, president of other off by an incorporator – if in the fiduciary by that fiduciary | ficer – if directors or officers have not been he hands of a receiver, trustee, or other courty) | |
| | · · · · · · · · · · · · · · · · · · · | 1 () () | |
| P | (Aykon or printed | 1 name of person signing) | |
| - | (Title of person s | Igning) | |