P23000002715

Office Use Only



600411664916

97/97/23--01907--017 **35.00

S ROLLERTS
AUG 1 1 2023

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

. . .

NAME OF CORPORATION:	E OF CORPORATION: CAREMED HOMECARE & DISPOSABLES INC.					
DOCUMENT NUMBER:	JMBER: P23000002715					
The enclosed Articles of Amendmen	and fee are su	abmitted for filing.				
Please return all correspondence con	cerning this ma	atter to the following:				
ARLEEN BE	ARLEEN BETANCOURT					
	Name of Contact Person					
	Firm/ Company					
6303 BLUE L	6303 BLUE LAGOON DR SUITE 400					
	Address					
MIAMI FL 33	MIAMI FL 33126					
		City/ State and Zip Co	de			
caremed.meds	supplies@gmai	l.com				
E-mail ac	idress: (to be u	sed for future annual repo	rt notification)			
For further information concerning the	his matter, plea	se call:				
Arleen Betancourt		at (³⁰⁵	431-3457			
Name of Contact Person		Area C	ode & Daytime Telephone Number			
Enclosed is a check for the following	g amount made	payable to the Florida De	partment of State:			
-	Filing Fee & cate 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)			
Mailing Address Amendment Section		Amer	t Address adment Section			
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Caremed Homecare & Disposables Inc.

(Name of Corporation as currently file	ed with the Florida Dept. of State)
233000002715	
(Document Number of Cor	poration (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flori</i> s Articles of Incorporation:	da Profit Corporation adopts the following amendment(s
. If amending name, enter the new name of the corporation:	TV.
ame must be distinguishable and contain the word "corporation," "comp Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A pro chartered," "professional association," or the abbreviation "P.A."	The new any," or "incorporated" or the abbreviation "Corp.," afessional corporation name must contain the word
Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	2
	
-	
Enter new mailing address, if applicable:	<u>1</u>
(Mailing address MAY BE A POST OFFICE BOX)	٣
-	
	 د
. If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address: Name of New Registered Agent	n Florida, enter the name of the
(Florida street ad	(dress)
New Registered Office Address:	
	, Florida

☐ 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)

Example:

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>John</u>	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP, S	AMBERSLEY, LISA-MARIE	307 FARNHAM BLK M
Add			DEERFIELD BEACH, FL 33440
X Remove			
2) Change	VP	AMBERSLEY, DELROY	307 FARNHAM BLK M
Add			DEERFIELD BEACH, FL 33440
X Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amending or adding additional Article</u> (Attach additional sheets, if necessary).	(Be specific)
F. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
SHAKES/OWNEKSHIP: MAINTAINED A	AT 50/50 BETWEEN LESLIE AMBERSLEY & MARIE MORGAN-AMBERSI
	···-
· · · · · · · · · · · · · · · · · · ·	

The date of each amendmen date this document was signed	t(s) adoption:	, if other than the
Effective date if applicable:	06/22/2023	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, the Department of State's records.	this date will not be listed as the
Adoption of Ameadment(s)	(CHECK ONE)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendere sufficient for approval.	iment(s)
must be separately provide	re approved by the shareholders through voting groups. The following sed for each voting group entitled to vote separately on the amendment(s)	tatement):
'The number of votes	cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
	12 2002	
Dated	June Com	
Signature	Mollingrivinger	
(B	y a director, president or other officer - if directors of officers have not	been
et 20	lected, by an incorporator - if in the hands of a receiver, trustee, or othe pointed fiduciary by that fiduciary)	r court
·	Marie Muxono- Amberge	ĽĮ
	(Typed or printed name of person signing)	
	VPI	
	(Title of person signing)	

.