P23000040498

(Requestor's Name)	
(Address)	300412
(Address)	000+12
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	87/18/23+-010
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	P8/10/3093

Office Use Only



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H2--019 *#35.00



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form for filing *Articles of Amendment* to amend the articles of incorporation of a *Florida Profit Corporation* pursuant to section 607.1006, Florida Statutes. This is a basic amendment form and may not satisfy all statutory requirements for amending.

A corporation can amend or add as many articles as necessary in one amendment.

- > The original incorporators cannot be amended.
- If amending the name of the corporation, the new name must be distinguishable on the records of the Florida Department of State. A preliminary search for name availability can be made through the Division's website at www.sunbiz.org. You are responsible for any name infringement that may result from your corporate name selection.
- If amending the registered agent, the new agent must sign accepting the appointment and state that he/she is familiar with the obligations of the position.
- If amending/adding officers/directors, list titles and addresses for each officer/director.
- If amending from a general corporation to a professional corporation, the purpose (specific nature of business) must be amended or added if not contained in the articles of incorporation.

If a section is not being amended, enter N/A or Not Applicable. The document must be typed or printed and must be legible.

Pursuant to section 607.0123, Florida Statutes, a delayed effective date may be specified but may not be later than the 90th day after the date on which the document is filed.

Filing Fee \$35.00 (Includes a letter of acknowledgment)

Certified Copy (optional) \$8.75

Certificate of Status (optional) \$8.75

Send one check in the total amount made payable to the Florida Department of State.

Please include a letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

For further information you may call the Amendment Section at (850) 245-6050

CR2E011 (1/20)

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: CHERSEA HOME	ECARE INC.	
DOCUMENT NUM	D22000040409		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	KETTIA BEAUVOIS		
		Name of Contact Person	1
	CHERSEA HOMECARE IN	C.	
		Firm/ Company	
	1799 W OAKLAND PARK	BLVD SUITE 306 B	
		Address	
	OAKLAND PARK, FL 3331	1	
		City/ State and Zip Cod	<u> </u>
For further informati	E-mail address: (to be us on concerning this matter, pleas	sed for future annual report	notification)
KETTIA BEAUVO	S	754 at (302-5241
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & 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	
Division of Corporations P.O. Box 6327		The Centre of Tallahassee	
Tallahassee, FL 32314		2415 1	N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	filed with the Florida Dept. of State)	
23000040498		
(Document Number of	Corporation (if known)	
irsuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> Articles of Incorporation:	Florida Profit Corporation adopts the follo	wing amendment(
If amending name, enter the new name of the corporation:		
		The new
me must be distinguishable and contain the word "corporation," "c nc.," or Co.," or the designation "Corp," "Inc," or "Co". A hartered," "professional association," or the abbreviation "P.A."		
Enter new principal office address, if applicable:		
rincipal office address <u>MUST BE A STREET ADDRESS</u>)		
Enter new mailing address, if applicable:		~
(Mailing address MAY BE A POST OFFICE BOX)		ω . ————————————————————————————————————
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If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the	PH 12: 34
new registered agent and/or the new registered office address:		ယ
Name of New Registered Agent		<u>.</u>
rame of their Regulated Agent		
(Florida stre	ent addresse)	
,	er ada/ess/	
New Registered Office Address:	, Florida, Florida	Zip Code)

Check if applicable

☐ 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)

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	<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>	Name	Address
1) Change	<u>s</u>	EUGENE STERVIL	1799 W OAKLAND PARK BLVI
Add			
X Remove			attitude
2) Change			
Add			
Remove 3) Change			
Add			
Remove			**************************************
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional a	Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)		
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If an amendment provides for an e	exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the a	amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A	(1)	
		-
		
	 	

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	06/21/2023	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
06/2 Effective date if applicable:	/2023	
Effective date <u>if applicable</u> :	(no more than 90 days after amend	ment file date)
Note: If the date inserted in this bl document's effective date on the De		g requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado action was not required.	oted by the incorporators, or board of directors v	vithout shareholder action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes of ficient for approval.	east for the amendment(s)
	oved by the shareholders through voting groups each voting group entitled to vote separately on	
"The number of votes cast	or the amendment(s) was/were sufficient for app	proval
by KETTIA BEAUVOIS		**
,	(voting group)	
06/21/2023 Dated Signature	W. The second of	
selected	ector, president or other officer – if directors or by an incorporator – if in the hands of a received fiduciary by that fiduciary)	
	CETTIA BEAUVOIS	
	(Typed or printed name of person sig	ning)
	PRESIDENT	
	(Title of person signing)	