P940000 9931

(Re	equestor's Name)	
(Ad	ddress)	
(Ad	ddress) .	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nar	ne)
(Do	ocument Number)	
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Amend (a 9.25.13)

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Westland Home Gove Services, Incomment number: P9400019931
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Alberto Gomez Name of Contact Person Westland Home Ore Services Inc. Firm/Company 8700 West Plagler St, #375 Address Miami Fr. 33174 City/State and Zip Code Niukadonale Quahoo Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alberto Gomez at (305) 220-9151 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State: \$\frac{1}{2}\$

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

Street Address
Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

Westland Home Core	Services Inc	=			
(Name of Corporation as currently filed with the F	lorida Dept. of State)				
194000019931		_			
(Document Number of Corporation (i	fknown)				
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following	ing amendment(s) to			
A. If amending name, enter the new name of the corporation:					
	OIA	The new			
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	Co". A professional corporation name mus.				
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Ola	_			
C. Enter new mailing address, if applicable: (Mailing address MAYBE A POST OFFICE BOX)	NIA	13 SEP 10 P			
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:					
Name of New Registered Agent Alberto	Gomez				
8700 W 1 (Florida str	Flagler St. #375				
New Registered Office Address: (City)	, Florida 33 ((Zip Code)	74			
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v Signature of New Registered Agent	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.

Evample:	ve, una bang binan	, or us an Aua.	
Example: <u>X</u> Change	PT John D	<u>loe</u>	
X Remove	V Mike J	ones	
X Add	<u>SV</u> <u>Saily S</u>	<u>Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P5	Adolys Perez	8700 w. Flaglers
Add Remove			#375 Miami, F233174
2) Change	P5	Alberto Gomez	
Add Remove			#375 Miami, FZ 33174
3) Change	<u></u>		·
Add			
4) Change	 		
Add			
5) Change			
Add			
Remove 6) Change			
Add		, . ,	
Remove			

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If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
OlA	

The date of each simendment(s) adoption:	, if other than th
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
. •	
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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 8 30 2013	
Signature v	
(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)	
Alberto bromez	
(Typed or printed name of person signing)	
President & Secretary	

(Title of person signing)