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COR AMND/RESTATE/CORRECT OR O/D RESIGN WESTLAND HOME CARE SERVICES, INC.

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Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation

WESTLAND HOME CARE SERVICES, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P94000019931 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation; A. If smending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Plotida, cater the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address)

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address;

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

Florida

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| If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and tide, nat | ne, 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 Clark; CEO = Chief Executive Officer; CFQ = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treusurer, 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, Y as Remove, and Sally Smith, SV as an Add.

| Example: X Change | 贮 | John Do | <u>c</u> | | | |
|-------------------------------|--------------------------|-------------|----------------|---|--|--|
| X Remove | $\underline{\mathbf{v}}$ | Mike Jones | | | | |
| X Add | <u>\$V</u> | Sally Smith | | | | |
| Type of Action (Check One) | <u>Title</u> | | <u> Мишо</u> | Address | | |
| i) Change | V | | SARAHI LA ROSA | 1580 W 46 ST # 123 | | |
| Add | | | | HIALEAH, FL 33012 | | |
| Removo | | | | | | |
| 2) Change | | _ | | | | |
| Add Add | | | | | | |
| Rômovo | | | | | | |
| 3) Change | | _ | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 4) Change | | _ | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 5) Change | | | | | | |
| Add Add | | | | Promotion Committee of the Committee of | | |
| Remove | | | | | | |
| . 🗆 | | | | | | |
| 6) L Change | | _ | | | | |
| Add | | | · | | | |
| Remove | | | | | | |

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| . If amending or adding additional Arti (Attach additional sheets, if necessary), | icies, enter changeist nere: (Bu spacific) |
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| If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A) | nange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself: |
| G 101 upplicable, maleure 1011) | |
| | |
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| | |
| | |
| | |
| | |

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| The date of each amendment(s) adoption: 10/16/2014 | if other than the |
|---|-------------------|
| date this document was signed. | |
| Effective date if applicable: 10/16/2014 | _ |
| (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 100% | |
| (voting group) | |
| The amendment(s) was/were adopted by the board of directors without shareholder action was not required. | |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. | |
| Dated 10/16/2014 | |
| | |
| Signature (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 GOMEZ | |
| (Typed or printed name of person signing) | _ |
| PRESIDENT | |
| (Title of person signing) | |