

P94000036788

CCRS
103 N. MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: CINDY HICKS

DATE: 4-2-02

600005183346--9
-04/02/02--01034--019
****385.00 ****35.00

REF. #: 0472.5840

CORP. NAME: Helen's Home Health
Care, Inc.

FILED
2002 APR -2 PM 3:33
TALLAHASSEE, FL 32301
RECEIVED
OFFICE OF THE
CLERK OF THE
SUPREME COURT
TALLAHASSEE, FL 32301

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OFFICE OF THE
CLERK OF THE
SUPREME COURT
TALLAHASSEE, FL 32301
2002 APR -2 PM 1:00
- | | | |
|--|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | <input type="checkbox"/> UCC-1 | <input type="checkbox"/> UCC3 |
| <input type="checkbox"/> OTHER: Change of agent | | |

STATE FEES PREPAID WITH CHECK# 501959 FOR \$ 385.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

C. Coulliette APR 02 2002
COST LIMIT: \$

PLEASE RETURN:

- | | | |
|--|---|--|
| <input type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

**STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED
AGENT FOR CORPORATION**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508 or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office and registered agent, in the State of Florida.

1. The name of the corporation is:

HELEN'S HOME HEALTH CARE, INC.

2. The mailing address of the corporation is:

**11355 S.W. 84th Street
Miami, Florida 33173**

3. Date of incorporation/qualification: May 16, 1994

Document number: **P94000036788**

4. The name of the current registered agent and registered office as shown on the records of the Florida Department of State is:


**JOSEPH L. ZUMPARO, ESQ.
Ferrell Schultz Carter Zumpano & Fertel, P.A.
201 South Biscayne Blvd., 34th Floor
Miami, FL 33131**

5. The name and address of the new registered agent and registered office is:

**JOSEPH L. ZUMPARO, P.A.
Ferrell Schultz Carter Zumpano & Fertel, P.A.
201 South Biscayne Blvd., 34th Floor
Miami, FL 33131**

The street address of the registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

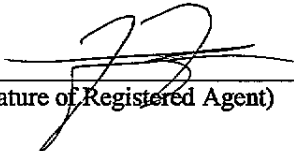

(Signature of an officer, chairman or vice chairman of the board)

Jacob Shahan, CEO
(Printed or typed name and title)

3/28/02
(Date)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Signature of Registered Agent)

3-28-02
(Date)

JOE ZUMPARO as the President of Josepu S. Zumpano, P.A.
(Printed or typed name and Title)