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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

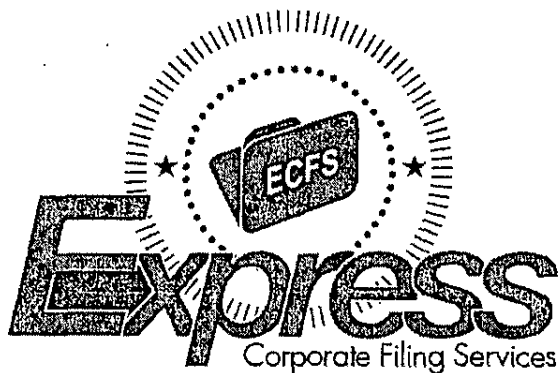
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EXAMINER

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CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Nursing Love & Care Facilities Enterprises Inc.
(Corporation Name) (Document #)
2. (P97000040193)
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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NEW FILINGS	
☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☒	Amendment
☐	Resignation of R.A., Officer/ Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

Examiner's Initials

**ARTICLES OF AMENDMENT OF
ARTICLES OF INCORPORATION
FOR
NURSING LOVE & CARE FACILITIES ENTERPRISES INC.**

Pursuant to the provisions of section 607-1006, Florida statutes, the undersigned corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment (s) adopted:

**ARTICLE SEVEN
NEW BOARD OF DIRECTORS**

The new Board of Directors shall be as follows:

<u>Name</u>	<u>Address</u>	<u>Office</u>	<u>Shares</u>
Elia Murias	16393 Stone Heaven Road Miami Lakes FL 33014	President	500

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if no contained in the amendment itself, are as follows:

THIRD: the date of each amendment's adoption: 8/30/11

FOURTH: Adoption of Amendment(s) (check one)

_____ The amendment (s) was/were adopted by the incorporators or board of Directors without shareholder action and shareholders action was not required.

 X

The amendment (s) was/were approved by the shareholders. The number of votes cast for the amendment (s) was/were sufficient for approval.

_____ The amendment (s) was/were approved by shareholders through voting groups.
(The following statement must be separately provided for each voting group entitled to vote separately on the amendment (s).)

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The number of votes cast for amendment (s) was/were sufficient for approval

By _____
(Voting group)

By *Elia Murias*
Elia Murias, President

STATE OF FLORIDA
COUNTY OF MIAMI DADE

The foregoing instrument was acknowledged before me this 30th day of August, 2011 by Elia Murias,
who is personally known to me.

[Signature]
Notary Public

Seal



JORGE R. LOPEZ
MY COMMISSION # EE 043656
EXPIRES: December 8, 2014
Bonded Thru Budget Notary Services