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Florida Department of State

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Account Name : XIOMARA LEE, P.A.

Account Number : 120040000008 Phone : (305)262-2323 Fax Number : (305)262-2324 CRETARY OF STATE AHASSEE, FLORIDA

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BASIC AMENDMENT

BRIGHTER DAYS HOME HEALTH CARE INC.

Certificate of Status	0
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Articles of Amendment to Articles of Incorporation of

poration

EALTH CARE INC

With the Florida Dept. of State)

TOTAL

SECRETARY OF STATE

BRIGHTER DAYS HOME HEALTH CARE INC

(Name of corporation as currently filed with the Florida Dept. of State)

P97000060107

(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:

NEW CORPORATE NAME (if changing):

(must contain the word "corporation	, "company," or '1	ucorporated or	tue application	і "Согр.," "шс.,"	or "Co.")
AMENDMENTS ADOPTED- and/or Article Title(s) being am				icate Article I	Vumber(s)
CHANGE PRINCIPAL/ MAILING A	DDRESS TO : 26	51 SW 20 ST	STE 3, MIAMI,	FL 33142	¥
DELETE PRESIDENT : MARGARI	TA MARTINEZ	11890 SW 8T	H 3T, STE 205	i, MIAMI, FL 33	184
AND ADD NEW PRESIDENT : LA	ZARO MARTINEZ	2651 SW 20	ST STE 3, MIA	MI, FL 33142	
DELETE REGISTERED AGENT: N	//ARGARITA MAF	RTINEZ 11890	SW 8TH ST, S	TE 205, MIAM	II, FL
3184, AND ADD NEW REGISTER	RED AGENT: LAZ	ARO MARTINE	EZ 2651 SW 2	0 ST STE 3, M	IIAMI, FL
3142		<u></u>			<u> </u>
<u></u>				·	<u> · </u>
		<u> </u>		· .	
			<u> </u>	¥	·
	(Attach additio	nal pages if nece	essary)		
If an amendment provides for ex for implementing the amendmen	nt if not containe	fication, or ca d in the amen	dment itself: (if not applicable	, indicate N//
		···		•	
					···

(continued)

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(((HOSO88288701 3))) The date of each amendment(s) adoption: AUGUST 31, 2005 Effective date if applicable: AUGUST 31, 2005 (no more than 90 days after amondment file date) Adoption of Amendment(s) (CRECK ONE) The amendment(s) was were approved 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 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. day of AUGUST Signed this 315T Signature (By a director, president or other officer - Edirectors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other count appointed fiduciary by that fiduciary) MARGARITA MARTINEZ

(Typed or primed name of person signing)

PRESIDENT (Title of person signing) XIOMARA LEE PA

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XIOMARA LEE PA

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HERBEY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITIONAS REGISTERED AGENT.

REGISTERED AGENT

Lazaro Harlinez

2687 SW 2057 STE 3 Himi, FC 33142