

P97000083871

Medical Associate Home Health, Inc.

5400 S. University Dr., Suite 112
Davie, FL 33328

City/State/Zip

Phone #

Office Use Only

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

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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-10/05/98-01084--003
*****87.50 *****43.75

FILED
99 JAN 25 PM 1:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

October 8, 1998

MEDICAL ASSOCIATE CONSULTANTS
1802 N. UNIVERSITY DRIVE
SUITE 203B
PLANTATION, FL 33322

SUBJECT: CARTER TRADING COMPANY
Ref. Number: P97000083871

We have received your document for CARTER TRADING COMPANY and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Your document is not clear if you wish to change the fictitious name to the corporate name of the corporation.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Section 607.1622(7) or 617.1622(7), Florida Statutes, provides that a corporation may file an additional updated annual report. The enclosed annual report form can be used for designating the current names and addresses of the officers, directors and/or registered agent of the corporation. Please note the applicable filing fee is \$61.25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6905.

Thelma Lewis
Corporate Specialist Supervisor

Letter Number: 898A00050108

RECEIVED
99 JAN 25 AM 10:00
DIVISION OF CORPORATIONS

**ARTICLES OF AMENDMENT
TO THE ARTICLES OF INCORPORATION OF
CARTER TRADING COMPANY**

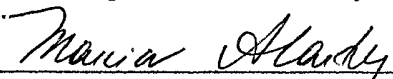
Pursuant to the provisions of Chapter 607.1001 et seq. of the Florida Statutes, the undersigned corporation hereby adopts the following Articles of Amendment to its Articles of Incorporation:

1. The name of the corporation is CARTER TRADING COMPANY.
2. The following amendment of the Articles of Incorporation was adopted by the Board of Directors of the corporation on September 15, 1998, in the manner prescribed by the Florida business Corporation Act:

ARTICLE I: NAME OF THE CORPORATION is hereby amended to indicate that the new name shall be MEDICAL ASSOCIATE HOME HEALTH, INC..

3. The shareholders are not required to vote on the amendment to the Articles of Incorporation.

IN WITNESS WHEREOF, I, MARCIA A. CARTER, Director and President of CARTER TRADING COMPANY, have signed these Articles of Amendment on this 20 day of JANUARY, 1999, and acknowledge the same to be my act.



MARCIA A. CARTER

STATE OF FLORIDA)

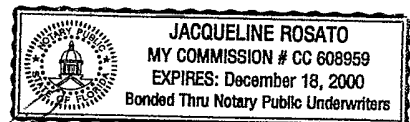
COUNTY OF DADE)

The foregoing instrument was sworn to before me this 20 day of JANUARY, 1999 by MARCIA A. CARTER, as Director and President of CARTER TRADING COMPANY, a Florida corporation. She personally appeared before me at the time of notarization, and is personally known to me or has produced a Florida Drivers License.

NOTARY PUBLIC:

Sign: 

Print: Jacqueline Rosato



FILED
99 JAN 25 PM 4:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA