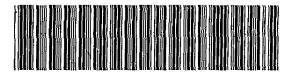
## P98000095840

(Re	equestor's Name)	
(Ad	ldress)	
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Amend

FILED

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SECRETARY OF STATE
FALLARIASSIT FOR STATE

Kzlorzloy

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF COR	PORATION: SANTOVENIA	ADULT DAY CARE INC.	<u> </u>
DOCUMENT N	JMBER:P98000095840_	<u> </u>	
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	is matter to the following:	
	MARISA	BEL PERDOMO	
	(Name	of Contact Person)	
	SANTOVENIA	A ADULT DAY CARE INC.	
_	(Fi	rm/ Company)	
	13359 \$	SW 42 STREET	
, ,. —		(Address)	
		1I, FL 33175	
For further inform	(City/ Sation concerning this matter,	ate/and Zip Code) please call:	
MARISABEL PERD	омо	at (305 ) 227-950	0
(Nam	e of Contact Person)		e Telephone Number)
Enclosed is a chec	k for the following amount:		
□ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status		☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Street Address Amendment Sect Division of Corp 409 E. Gaines St Tallahassee, FL	orations reet

## Articles of Amendment to

Articles of	of incorporation		<b>公会 し</b>
	of		무우 공
SANTOVENIA ADU	LT DAY CARE INC.		. TST -
(Name of corporation as current	ly filed with the Florid	la Dept. of State)	7 TH 3
P98000	0095840		
	r of corporation (if kno	own)	<u></u>
rsuant to the provisions of section 607.1006, For some opts the following amendment(s) to its Article			rporation
W CORPORATE NAME (if changing):			
ist contain the word "corporation," "company," or "inc	orporated" or the abbr	eviation "Corp.," "Inc.,"	or "Co.")
professional corporation must contain the word "charte	red", "professional ass	sociation," or the abbrev	iation "P.A.
<u>MENDMENTS ADOPTED</u> - (OTHER THA			: Number(
d/or Article Title(s) being amended, added or	deleted: ( <u>BE SPEC</u>	IFIC)	••
RECTORS:			
RED TORO.			
MADULINODA MOT DOTODENT			
MARILU MORA - VICE-PRESIDENT	***	DELETED	÷
MARILU MORA - VICE-PRESIDENT		DELETED	÷
MARILU MORA - VICE-PRESIDENT		DELETED	÷
MARILU MURA - VICE-PRESIDENT		DELETED	*
MARILU MORA - VICE-PRESIDENT		DELETED 4	<i>*</i>
		DELETED	÷
MARILU MORA - VICE-PRESIDENT		DELETED	÷
		DELETED	÷
		DELETED	÷

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

1	-					• •	
N/A			71.		į.	• <u>-</u>	·
		 		.327 - '			
		 11.5 444.4				<u> </u>	

The date of each amendment(s) adoption: 10-12-2004
Effective date if applicable: 10-12-2004
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK 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
(voting group)
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.
Signed this 12TH day of OCTOBER , 2004
Signature Mausille Vendonin
(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)
MARISABEL PERDOMO
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

FILING FEE: \$35