

PP9000019589

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☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

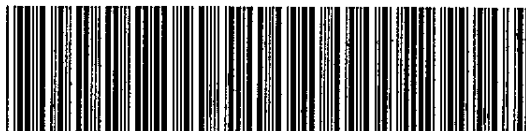
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05/10/04 -01123--002 **49.75

FILED
04 JUN -1 PM 3:00
CLERK OF COURT
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: UNION HOME CARE

DOCUMENT NUMBER: P99000019589

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARIA G. FELIPE

(Name of Person)

UNION HOME CARE

(Name of Firm/ Company)

12915 S.W. 21 STREET

(Address)

MIAMI, FL 33175

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

SYLVIA GARCIA

(Name of Person)

at (786) 246-1007

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☒ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 17, 2004

MARIA G. FELIPE
UNION HOME CARE, INC.
12915 S.W. 21ST STREET
MIAMI, FL 33175

SUBJECT: UNION HOME CARE INC.
Ref. Number: P99000019589

We have received your document for UNION HOME CARE INC. and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

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) 245-6882.

Maryanne Dickey
Document Specialist

Letter Number: 004A00034048

Articles of Amendment
to
Articles of Incorporation
of

UNION HOME CARE

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

P99000019589

(Document number of corporation (if known))

FILED
04 JUN -1 PM 3:00
CLERK OF STATE
TALLAHASSEE, FLORIDA

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 "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

SECTION: EXISTING DIRECTORS

OLD: OSMANY DIAZ 12915 S.W. 21 ST., MIAMI, FL 33175

NEW: MARIA G. FELIFE 12915 S.W. 21 ST., MIAMI, FL 33175

SECTION: EXISTING REGISTERED AGENT

OLD: OSMANY DIAZ 12915 S.W. 21 ST., MIAMI, FL 33175

NEW: MARIA G. FELIFE 12915 S.W. 21 ST., MIAMI, FL 33175

I, MARIA G. FELIFE HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES AND

RESPONSIBILITIES AS REGISTERED AGENT FOR UNION HOME CARE.

ACCEPT: [Signature]

DATE

4/30/04.

(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)

ALL STOCK S ARE TRANSFERRRED TO THE NEW DIRECTOR.

(continued)

The date of each amendment(s) adoption: 04/30/2004

Effective date if applicable: _____
(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):

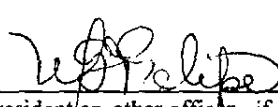
"The number of votes cast for the amendment(s) was/were sufficient for approval by _____."
(voting group)

☐ 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 30 day of APRIL, 2004.

Signature


(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)

MARIA G. FELIPE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE: \$35