551198

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(Document Number)
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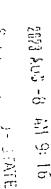
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: PROTO CARE, IN	С			
DOCUMENT NUM					
	es of Amendment and fee are sul	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	ANASTASIA PROTOPAPA	DAKIS			
		Name of Contact Person	1		
		Firm/ Company			
	1147 VAN BUREN STREET	-			
	•	Address	,		
	HOLLYWOOD, FL 33019				
		City/ State and Zip Cod	e		
	E-mail address: (to be us	ed for future annual report	notification)		
	San and San an	15.			
For tunner informati	on concerning this matter, pleas	se can:		7.03	65,79
DIANNE S DEMOS	S CPA	954	de & Daytime Telephone Number		{{?}}} #Uù
Name	e of Contact Person	Area Co	de & Daytime Telephone Number		۳. ز.
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:		- 6
■ \$35 Filing Fee	□\$43.75 Filing Fee &	□\$43.75 Filing Fee &	□\$52.50 Filing Fee		<u> </u>
_ *************************************	Certificate of Status	Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)		1 5 E
	ailing Address		Address Iment Section		
	vision of Corporations	Divisio	on of Corporations		
- •	O. Box 6327		entre of Tallahassee N. Monroe Street, Suite 810		
t a	illahassee, FL 32314		N. Monroe Street, Suite 510		

Articles of Amendment to Articles of Incorporation of

(<u>Name c</u>	f Corporation as currently	filed with the Florida De	pt. of State)	
	(Document Number of	Corporation (if known)		
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, this <i>F</i>	lorida Profit Corporation	adopts the following	ng amendmen
. If amending name, enter the new na	ime of the corporation:			
				_The new
ime must be distinguishable and contain lnc.," or Co.," or the designation "C chartered," "professional association,"	Torp," "Inc," or "Co". A	mpany," or "incorporated professional corporation	" or the abbreviation name must contain	on "Corp.," in the word
Enter new principal office address, Principal office address <u>MUST BE A S</u>				
				
Enter new mailing address, if appli (Mailing address MAY BE A POST)				
(Mutting undress mixt Dis ATOST)	2111CL BO.L)			
If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the n	ame of the	
				. n
Name of New Registered Agent	1147 VAN BUREN STREE	<u>-</u>		
	(Florida stre			- : - '-
New Registered Office Address:	HOLLYWOOD		. Florida 33019	. C
New Neglatered Office Andrews.		City)	,·····	Code) .
ew Registered Agent's Signature, if c ereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar w	ith and accept the obligation	ons of the position.	, L.
,		, .,	,	
	Change CAL B	gistered Agent, if changing		_

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	Address	
1) X Change	P	Amastasia Protopapuciar	U47 VAN BUREN STREET	
Add			HOLLYWOOD, FL 33019	
Remove	S	Dennition Own remain	1161 NE 165 TERRACE	
2) X Change		Demitia Protopapadakis	N MIAMI BCH, FL 33162	
Remove 3) X Change	<u>v</u>	Evangelos Protopapadalus	1161 NE 165 TERRACE	
Add			N MIAMI BCH, FL 33162	
Remove 4) Change	Т	Harula Novden	5403 BROKEN SOUND BLVD	رة دري
Add			# 201 [7. S]	(5) J Alvi
Remove			BOCA RATON, FL 33487	Ç.
5) Change	 -			سميز امسا
Add				ب - 4 ق
Remove				n n
6) Change				
Add				
Remove				

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	<u></u> .,
nendment provides for an exchange, reclassification, or cancellation of issued ions for implementing the amendment if not contained in the amendment itse	<u>snures,</u> lf:
not applicable, indicate N/A)	<u></u>
	ψ.
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	2 12 T
	in. 1

	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file	e date)
	, ,	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requir Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without s	shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for t sufficient for approval.	the amendment(s)
	pproved by the shareholders through voting groups. The for or each voting group entitled to vote separately on the ame.	
"The number of votes car	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
selec	director, president or other officer – if directors or officers led, by an incorporator – if in the hands of a receiver, truste need fiduciary by that fiduciary) ANASTASIA PROTOPAPADAKIS (Typed or printed name of person signing) PRESIDENT (Title of person signing)	ee, or other court
		31 9: 16