## V57523

(Re	questor's Name)	<del></del>
	,	
(Ad	dress)	
,	,	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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2018 JUN 22 PM 4: 33
SECRETARY OF STATE
SECRETARY OF STATE
ANASSEE, FLORIDA

C. GOLDEN
JUN 2 5 2018

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MF Home Care S	Services, Inc.	
DOCUMENT NUMB			
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
-	Thomas Wingo		
_		Name of Contact Person	1
F	Palms Home Care		
_		Firm/ Company	
•	1700 66th Street North, St	uite 101	
<del>-</del>		Address	
\$	St. Petersburg, FL 33710		
_	<del>"</del>	City/ State and Zip Cod	e
twingo	@palmshomehealthcare.	com	
<del></del>	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, please	se call:	
Thomas Wingo		at (	300-1433
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Amer Divis P.O.	ing Address ndment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

2018 JUN 22 PM 4::

MF Home Care Services, Inc.		CEOSETABLY OF	
( <u>Name</u>	of Corporation as curre	ently filed with the Florida Dept. of State) TALLAHASSEE, FI	
V57523			
	(Document Numbe	er of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, tl	his Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new na	ame of the corporation:		
N/A		The new	
	ation "Corp," "Inc." o	ition," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the	
B. Enter new principal office address,	if applicable	N/A	
(Principal office address MUST BE A S			
C. Enter new mailing address, if appl	icable:		
(Mailing address MAY BE A POST		1700 66th Street North, Suite 101	
		St. Petersburg, FL 33710	
		ddress in Florida, enter the name of the	
new registered agent and/or the ne		ess:	
Name of New Registered Agent	Thomas Wingo		
	1700 66th Street Nor	th, Suite 101	
	(Florida	ı street address)	
New Registered Office Address:	St. Petersburg	33710 , Florida	
THE STATE ST		(City) (Zip Code)	
New Registered Agent's Signature, if c		ent: ar with and accept the obligations of the position.	
Thereby accept the appointment as regist	erea agem. Tam jamin	ar wan and accept the notigations of the position.	
		)	
	Signature of Ne	w Registered Agent, if changing	

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.

Example: X_Change	<u>PT</u>	John Do	<u>ne</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	<u>Şally Sı</u>	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	P		Margarita Ferro	 6648 SW 62 Terrace
Add				Miami, FL 33143
X Remove				
2) Change	Р	_	Carol R. Thornton	1700 66th Street North
X Add				Suite 101
Remove				St. Petersburg, FL 33710
3) Change	CFO		Thomas Wingo	 1700 66th Street North
X Add				 Suite 101
Remove				St. Petersburg, FL 33710
4) Change		_		
Add				
Remove				
5) Change	,			 
Add				
Remove				
6) Change		_		 
Add				
Remove				

	ch additional sheets, if necessary). (Be specific)
I/A	
	<del></del>
. <u>If ar</u> pro	n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
	<del></del>

N/A The date of each amendment(s) adoption:	, if other than the
date this document was signed.	, if other than to
N/A	
Effective date if applicable:	<del></del>
(no more than 90 days after amendment file	date)
Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	e amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The fol must be separately provided for each voting group entitled to vote separately on the amer	
"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 action was not required.	and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	shareholder
Dated 06   14   2018	
$\bigcirc$ $\bigcirc$ $\bigcirc$	
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	c, or other court
appointed fiduciary by that fiduciary)	
Thomas Wingo (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
CFO	
(Title of person signing)	•