

731206

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TALLAHASSEE, FLORIDA

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AND
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C. LEWIS
NOV 4 2013
EXAMINER



Separating a troubled past
from a bright future.

AMIKids.org

October 21, 2013

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

To whom it may concern:

Please find enclosed Articles of Amendment for AMIKIDS MIAMI-DADE, INC.,
FEI/EIN Number – 591561549, Document # 731206. With a payment of \$35.00 by
check # 124646 for filing fees and a letter of acknowledgment.

We are in need of amending the officers/directors information as stated in the Articles of
Amendment.

If anything further is needed, please let me know.

Sincerely,

A handwritten signature in black ink that reads 'Melissa Chaves'.

Melissa Chaves
Office Manager

/mac

AMIKids Miami-Dade Amendment Ltr.
Enclosures



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: AMIKIDS MIAMI-DADE, INC.

DOCUMENT NUMBER: 731206

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

Please return all correspondence concerning this matter to the following:

MELISSA CHAVES

(Name of Contact Person)

AMIKIDS

(Firm/ Company)

5915 BENJAMIN CENTER DRIVE

(Address)

TAMPA, FL 33634

(City/ State and Zip Code)

mchaves@amikids.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melissa Chaves

(Name of Contact Person)

at (813) 887-3300

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

APPROVED
AND
FILED

13 OCT 28 PM 1:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

AMIKIDS MIAMI-DADE, INC.

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

731206

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

Not Applicable

The new

name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

*(Principal office address **MUST BE A STREET ADDRESS**)*

Not Applicable

C. Enter new mailing address, if applicable:

*(Mailing address **MAY BE A POST OFFICE BOX**)*

Not Applicable

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Not Applicable

(Florida street address)

New Registered Office Address:

Florida

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>C</u>	<u>SCOTT PERDIGON</u>	<u>9100 S. Dadeland Blvd.</u> <u>Miami, FL</u> <u>33156</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>V.T. Williams</u>	<u>9130 Dadeland Blvd.</u> <u>#1400</u> <u>Miami, FL 33156</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>C</u>	<u>Jorge Alvarez, CFP</u>	<u>777 Brickell Ave.</u> <u>2nd Floor</u> <u>Miami, FL 33131</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Corey A. Lee</u>	<u>1111 Brickell Ave.</u> <u>Ste. 2500</u> <u>Miami, FL 33131</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Terrance Levell</u>	<u>1820 Arthur Lamb Junior Road</u> <u>Miami, FL 33149</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Enrique Garcia</u>	<u>2701 N.E. 151 Street</u> <u>North Miami Beach, FL 33160</u>

The date of each amendment(s) adoption: _____
date this document was signed.

Effective date if applicable: September 24, 2013
(no more than 90 days after amendment file date)

APPROVED
AND
FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Adoption of Amendment(s) **(CHECK ONE)**

- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated September 24, 2013

Signature 

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

OB Stander
(Typed or printed name of person signing)

Director
(Title of person signing)