742488

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	Small World Day Ca	re Center Inc		
	742488			
DOCUMENT NUMBER:		****		
The enclosed Articles of An	nendment and fee are subm	nitted for filing.		
Please return all corresponde	ence concerning this matte	r to the following:		
Teresa Ann Sipper				
······································	- 11-11-11-11-11-11-11-11-11-11-11-11-11	(Name of Contact F	erson)	
Small World Day Care cent	er			
	<u> </u>	(Firm/ Compar	ıy)	
PO.Box 488				
		(Address)	· · · · · · · · · · · · · · · · · · ·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Bonifay Florida 32425				
		(City/ State and Zip	Code)	
hallbonifay@yahoo.com				
E	-mail address: (to be used	for future annual re	port notificatio	n)
For further information cond	erning this matter, please	call:		
Teresa Ann Sipper		a	850 t	547-3325
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the f	following amount made pay	yable to the Florida	Department of	State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	is Certif	50 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing A			reet Address	
_	nt Section of Corporations		mendment Sectivision of Corp	
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Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation

Small Woo	-1d. Day Care Center	Inc
	n as currently filed with the Florida Dept. of State)	
\(\)	742488	
(Docu	ument Number of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes, this Florida Not For Profit Corporation adopts	he following
A. If amending name, enter the new name of th	<u>te corporation:</u>	
		The new
name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nam	rd "corporation" or "incorporated" or the abbreviation "Corp ne.	
B. Enter new principal office address, if application (Principal office address MUST BE A STREET A		
		<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX	
		5
D. If amending the registered agent and/or reginew registered agent and/or the new register	istered office address in Florida, enter the name of the red office address:	PH
Name of New Registered Agent:	Teresa Ann Sipper	2: 1
	501 Mathushek Street	တ
New Registered Office Address:	: 501 Mathoshek ST. (Florida street address)	
	Bonifay , Florida 32423	<u> </u>
•	(City) (Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered Agent: nt. I am familiar with and accept the obligations of the position	n .
,	Duesa A. Siner	
•	Signature of New Registered Agent, if changing	

(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 X Remove X Add	<u>V</u> <u>Mi</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	PD	Teresa Ann Sipper	501 Mathushek Street POBox 488
X Add			Bonifay Fl. 32425
Remove			
2) Change	TR	Patricia Wilkerson	906 W. Banfill Ave
X Add			Bonifay Fl. 32425
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

		Divisies 8	Santa C
The date of each amendment(s) adoption:		, ii outei uitaii uit
date this document was signed.		15 JUN -4	PH 2: 10
5 Effective date <u>if applicable</u> :	7/9/2015		
	(no more than 90 days after a	mendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable state Department of State's records.	utory filing requirements, this date w	rill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/wer was/were sufficient for appr	re adopted by the members and the numb roval.	per of votes cast for the amendment(s	s) .
There are no members or m adopted by the board of dir	nembers entitled to vote on the amendme rectors.	ent(s). The amendment(s) was/were	
5/9/2015 Dated	5		
Signature	Coine A Hall		
have not	hairman or vice chairman of the board, part been selected, by an incorporator — if it urt appointed fiduciary by that fiduciary	n the hands of a receiver, trustee, or	1
	Louise H Hall	<u>/</u>	
	(Typed or printed nar	me of person signing)	
•	# President	L## Joerson signing)	70