(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
	ity/State/Zip/Phone #)	
(0	nty/Otato/Zip/i Hollo #/	
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Elling Officer:	
Special Instructions to	riling Onicer.	
:		
<u> </u>		

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Carrollwood \ DOCUMENT NUMBER: J70295	/illage Kindergarten	& Day Nursery Inc			
The enclosed Articles of Amendment and fee are sub	omitted for filing.				
Please return all correspondence concerning this mat	ter to the following:				
Monica Zimmer	Lawson				
	Name of Contact Person				
Zimmer Accoun	ting Service Inc	;			
	Firm/ Company				
2403 W State S	treet				
	Address				
Tampa, FL 3360	09				
	City/ State and Zip Code				
monicalawson@zin	nmeraccounting	n com			
	ed for future annual report n				
	·				
For further information concerning this matter, please	e call:				
Monica Zimmer Lawson		₎ 354-8301			
Name of Contact Person	Area Code	e & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:					
■ \$35 Filing Fee	□S43.75 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	Division Clifton E	nent Section of Corporations			

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

FILED

Carrollwood Village Kindergarten & Day Nursery, Inc

2013 NOV 22 PM 2: 17

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

J70295

STORE AND UF STATE
TALLAHASSEE, FLORIDA

(Document Number of Corporation (if known)

ent(s) to

A. If amending name, enter the new name of the	ic corporation.		The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp," "Inc," or "Co". A profes		or the abbreviation
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET).			
			
C. T			<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u> </u>		
			<u>.</u>
	4		
D. If amending the registered agent and/or reg new registered agent and/or the new register		, enter the name of t	<u>ne</u>
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:	(Provide street dadress)	, Florida	
New Registered Office Address.	(City)		p Code)

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>c</u>	
X Remove	<u>V</u>	Mike Jor	nes	
X Add	<u>sv</u>	Sally Sm	uith	
Type of Action (Check One)	Title		Name	Address
1) Change	VP	_	Rachel P Chaluisant	15018 Shaw Rd
✓ Add				Tampa FL 33625
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove			•	
6) Change				
Add	· · · ·			
Remove				

amending or adding additional Art tach additional sheets, if necessary).	(Be specific)	
	· · · · · · · · · · · · · · · · · · ·	
an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	Administration of Contained in the amendment tisen.	

The date of each amendment(s) adopti	on: Nov. 19, 2013	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) ent for approval.	
	d by the shareholders through voting groups. The following statement a voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the	ne amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
_{Dated} Nov. 19, 20	13	
Signature The	e Peek	
selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)	
	lly Diane Peek	
	(Typed or printed name of person signing)	
Pre	esident	
	(Title of person signing)	_