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(A	ddress)			
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And

R. WHITE AUG 2 3 2018

COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: CARROLLWOO	D VILLAGE KINDERGAI	RTEN & DAY NURSERY IN	
DOCUMENT NUN	170295			
The enclosed Article	es of Amendment and fee are si	abmitted for filing.		
Please return all corr	respondence concerning this ma	atter to the following:		
	MONICA ZIMMER LAWS	ON		
		Name of Contact Perso	n	
	ZIMMER ACCOUNTING	SERVICE INC		
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company		
	2403 W STATE STREET			
	TAMPA FL 33609			
		City/ State and Zip Cod	e	
mo	nicalawson@zimmeraccounting	y.com		
	<u> </u>	sed for future annual report	notification)	
		The second secon		
For further informati	ion concerning this matter, plea	se call:		
MONICA ZIMMEI	R LAWSON	at (813	,	
Name	e of Contact Person	at (813) Area Code & Daytime Telephone Numl		
Enclosed is a check	for the following amount made			
	_			
□ \$35 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)	
М	ailing Address	Street	<u>Address</u>	
Ar	nendment Section	Ameno	Iment Section	
	vision of Corporations		on of Corporations	
	P.O. Box 6327 Clifton Building			
Та	Ilahassee, FL 32314	2661 E	Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

CARROLLWOOD VILLAGE KINDERGARTEN & DAY NURSERY INC

2018 AUG 20 PM 1: 00

(<u>Name e</u>	of Corporation as currently	filed with the Florida Dept. of State
	J70295	TALLAHASSEE, FL
	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this <i>F</i>	Torida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new na	ame of the corporation:	
		The new
	nation "Corp," "Inc," or "C	" "company," or "incorporated" or the abbreviation To". A professional corporation name must contain the P.A."
3. Enter new principal office address, Principal office address <u>MUST BE A S</u>		
C. Enter new mailing address, if appli	icable:	
(Mailing address MAY BE A POST)	OFFICE BOX)	
 If amending the registered agent an new registered agent and/or the new 		ss in Florida, enter the name of the
	RACHEL P CHALUISAN	Ŧ
Name of New Registered Agent	15018 SHAW RD	-
	(Florida stre	et addressi
New Registered Office Address:	TAMPA	33625
		City) , Florida (Zip Code)
New Registered Agent's Signature, if c		
hereby accept the appointment as regist	tered agent. I am familiar w	ith and accept the obligations of the position.
	0 0 1 1 .	
$\mathcal{C}_{\mathcal{V}}$.	P. (halusi	て

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: XChange	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	NELLY DIANE PEEK	4405 EHRLICH RD
Add			TAMPA FL 33624
X Remove			
2) X Change	VP	RACHEL P CHALUISANT	15018 SHAW RD
Add			TAMPA FL 33625
Remove			
3) Change	P	RACHEL P CHALUISANT	15018 SHAW RD
XAdd			TAMPA FL 33625
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			111 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Remove			

	ditional sheets	additional Art i, if necessary).	(Be specifi	c)	-			
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		des for an exc					es.	
		enting the amo	endment if no	ot contained i	n the amendn	ient itself:		
(y no	ot applicable, i	naicate iv/A)						
							-a	_
				_				_
							. 8	
								_

	AUGUST 8, 2018	
The date of each amendment(s) as date this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statemen each voting group entitled to vote separately on the amendment(s):	t
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
AUGUST	3. 2018	
Dated	P. Chaluint	
(By a d selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Rachel Peek Chaluisant (Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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