FILED
May 15, 2003 8:00 am
Secretary of State

04-23-2003 90307 038 ****43.75
05-15-2003 90014 049 *****6.25

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2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000020163

1. Entity Name
TREEHOUSE DAYCARE, L.L.C.

Principal Place of Business	Mailing Address
598 S.E. PORT ST. LUCIE BOULEVARD PORT ST. LUCIE, FL 34984	598 S.E. PORT ST. LUCIE BOULEVARD PORT ST. LUCIE, FL 34984
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 14-1843430 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WIKFORS, MARSHA P ESQ 979 BEACHLAND BOULEVARD VERO BEACH, FL 32963	Name: T. Gregory Reymann, II, Esquire Street Address (P.O. Box Number Is Not Acceptable): 979 Beachland Boulevard City: Vero Beach FL Zip Code: 32963

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: T. Gregory Reymann, II (signature) DATE: 4-21-2003

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

File with fee is $50.00
Make check payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS	10. ADDITIONS/CHANGES
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: Alice Dorsey (manager/member), 598 S.E. Port St. Lucie Blvd., Port St. Lucie, FL 34984 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition
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CR2E083 (10/02)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Alice R. Dorsey (signature) Alice Dorsey (manager/member) 4-17-2003

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #