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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

AUG -4 2010

EXAMINER

COVER LETTER .

TO: Registration Sec Division of Corp	
SUBJECT:	Kids St Swim School, LLC Name of Limited Liability Company
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.
Please return all correspon	dence concerning this matter to the following:
	Sherri Adamousicz Name of Person
	Kids 15+ Swim School, Luc Firm/Company
	15696 715+ Drive North
	Palm Beach Gardens, FL 33418 City/State and Zip Code
•	Sherry LA5240 concast. net E-mail address to be used for future annual report notification)
For further information co	ncerning this matter, please call:
Sherri Name of	Area Code & Daytime Telephone Number
Enclosed is a check for the	e following amount:
\$25.00 Filing Fee	\$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Zip Code

Kids 15+ Swin	n Scho	Solve St. Luc. Sp. Sp. St. Luc. Sp. Sp. St. Luc. Sp. St.		
(A Flor		iability Company)		
The Articles of Organization for this Limited Liability	ty Company	were filed on August 2,2010 and assigned		
Florida document number <u>L646006 71473</u>	 •	0		
This amendment is submitted to amend the following	g:	•		
A. If amending name, enter the new name of the limited liability company here:				
The new name must be distinguishable and end with the "L.L.C."	words "Limit	ted Liability Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable	:	15696 71st Drive North		
(Principal office address MUST BE A STREET AL	ODRESS)	Palm Beach Gardens, FL 3341		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX	a			
B. If amending the registered agent and/or registered agent and/or the new registered office:		fice address on our records, enter the name of the new		
Name of New Registered Agent:	Sherr	i Adamowicz		
New Registered Office Address:	15696	71 St Drive North Enter Florida street address		
	Palm (Beach Gardens, Florida 33418		

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Begistered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Title** Address **Type of Action** <u>Name</u> Remove A Remove ☐ Add ☐ Remove Remove Remove ∭Add. Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Typed or printed name of signee

2010.

Sherri

Filing Fee: \$25.00

Signature of a member or authorized representative of a member