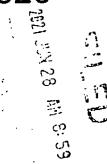
00012499

(Requestor	r's Name)
(Address)	
(Address)	
(Addless)	
(City/State	/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Documen	t Number)
Certified Copies	Certificates of Status
Special instructions to Filing (Officer

Office Use Only



600368841326



06/28/21--0101i--008 **25.00



RECEIVED

JUN 2 0 2021 ! ALBRITTON

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite I • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

			_
Mini World Learn	ning Center, LLC		
			-
			Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art. of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature			Fictitious Owner Search
Signature			Vehicle Search
			Driving Record
Requested by:			UCC or 3 File
Nomo	Data	Time	UCC 11 Search
Name	Date	Time	UCC 11 Retrieval
Walk-In 172 Ponger's Printing - Thom winder C			Courier

COVER LETTER

TO:

TO: Registration Sec Division of Corp			
		ARNING CENTER, LLC	
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	DA	APHNE MASSIEL PEREZ	
		Name of Person	
	MINI WOF	RLD LEARNING CENTER	, LLC
		Firm/Company	
	9628	B FONTAINEBLEAU BLV	D.
		Address	
		MIAMI, FL 33172	
		City/State and Zip Code	
	E-mail address: (to be used for future annual rep	ort notification)
For further information c	oncerning this matter, please c	all:	
DAPHNE MASSI	EL PEREZ	786	712-9380
Name o	f Person	Area Code	Daytime Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of C	Section 'orporations	Division	ion Section of Corporations
P.O. Box 632 Tallahassee,			re of Tallahassee Monroe Street, Suite 810

Tallahassee, FL 32303

ADDICTES OF AMENDMENT

ARTICLES OF AMENDMENT TO	
ARTICLES OF ORGANIZATION OF	
MINI WORLD LEARNING CENTER, LLC	ن ب
ne of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	<u> </u>

(Name of the Limited Li (A F	ability Company as it now apperorida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Liabili Florida document number		12/18/2007	and assigned
This amendment is submitted to amend the followin	ıg:		
A. If amending name, enter the new name of the	limited liability company	<u>here</u> :	
The new name must be distinguishable and contain the words	"Limited Liability Company," the	designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable	:		
(Principal office address MUST BE A STREET A	DDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	<u></u>		
B. If amending the registered agent and/or regis agent and/or the new registered office address he		records, <u>enter the n</u>	ame of the new registere
Name of New Registered Agent:			
New Registered Office Address:	Enter F	lorida street address	<u></u>
_		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Regis	stered 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 605, 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 Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u> Fitle</u>	<u>Name</u>	Address	Type of Action
MGRM	MARIA SANTAYANA	9628 FONTAINEBLEAU BLVD.	
		MIAMI, FL 33172	■Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			Change
			Remove
			□Remove
			□Remove
			Change

~	
	
in effectiv ote: If t	date, if other than the date of filing: 03/23/2021 (optional) we date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as effective date on the Department of State's records.
ecord sp	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	6/28/2021
	Signature of a member or authorized representative of a member
	DAbbno H. Peren

Filing Fee: \$25.00