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FEB 28 2012

EXAMINER



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REGREATE OF STATE
ALLAHASSEE, FLERGE

COVER LETTER

	egistration Se vision of Cor							
SURJECT	SUBJECT: Brite Start Learning & Child Care Center							
octore t								
The enclose	ed Articles of	Amendment and fee(s) are sul	omitted for filing.					
Please retui	n all correspo	indence concerning this matter	to the following:					
			Victoria Jordan Name of Person					
Brite Start			Learning & Child Care Cer	nter				
. 50			00 Mobile Hwy. Suite 9					
			Address					
			Pensacola, FI 32506	·				
		b. mail addrace: /	City/State and Zip Code ritestartkids@aol.com to be used for future annual report notif	(estion)				
For further	information c	oncerning this matter, please of	-	realion)				
Victoria Jordan			at (<u>850</u>)	457-0096				
	Name of	f Person	Area Code & Daytim	e Telephone Number				
Enclosed is	a check for th	ne following amount:						
₹ 25.00 I	Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ation Section n of Corporations ox 6327	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	on rations enter Circle				

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Brite Sta	rt Learning &	& Child Care (Center		
(<u>Name of the Limiter</u> (/	Florida Limited I	Liability Company)	s on our records.		
The Articles of Organization for this Limited L	were filed on	03/09/2009	and assigned		
Florida document number L0900002	3059		,		
This amendment is submitted to amend the foll	owing:				
A. If amending name, enter the new name o	f the limited liab	ility company her	<u>e</u> :		
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ited Liability Compa	ny," the designation	"LLC" or the	abbreviation
Enter new principal offices address, if applic	able:	Victoria Jorda	en	<u> </u>	
(Principal office address MUST BE A STREE	ET ADDRESS)	5000 Mobile ł	Hwy. Suite 9		Coppelace
		Pensacola, F	L 32506	<u>σ</u>	-marchi
				m===	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)				Mark ty.	
				3 N	<u> </u>
B. If amending the registered agent and/ registered agent and/or the new registered o	· ·		ur records, <u>enter</u>	the name o	of the new
Name of New Registered Agent: Victoria Jordan					
New Registered Office Address:	5000 Mobile	Hwy. Suite 9			
	Enter Florida street addr			ldress	
		Pensacola	, Florida	3250	
		City		Zip Code	e

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 Registered Agent

Page 1 of 2

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Victoria Jordan	2702 Massachusetts Ave Apt. 137 Pensacola, FL 32505	Add Remove
<u>MGRM</u>	Mary Tittle	6305 East Shore Drive Pensacola, FL 32505	Add _ ☑ Remove
MGRM	Howard L. Jordan, II	2702 Massachusetts Ave. Apt. 137 Pensacola, FL 32505	✓ Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, e	nter change(s) here: (Attach additional sheets, if necessary.)	_
			
Dated	February 21		
	Signature	of a member or authorized representative of a member	
		✓ Victoria Jordan	
•		Typed or printed name of signee	

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Filing Fee: \$25.00