# 109000103393

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### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT:

## Kozy Kids Family Childcare LLC.

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

## Tina Cash

Name of Person

## Kozy Kids Family Childcare. LLC

Firm/Company

22760 Penny Loop

Address

Land O Lakes FL. 34639

City/State and Zip Code

tooreal1313@msn.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tina Cash

813 996-7093

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 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

#### 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

Kozy Kids Family Childcare		ny ac it now appears on our r	anords )				
(Name of the Emitted	Florida Limited L	ny as it now appears on our re liability Company)	ecorus.				
The Articles of Organization for this Limited Lie Florida document number L09000103393	ability Company	were filed on March 22. 2	2013	and assign	ıed		
This amendment is submitted to amend the follo	wing:						
A. If amending name, <u>enter the new_name of</u>	the limited liab	ility company here:					
Hands In Faith Home Daycare LLC.							
The new name must be distinguishable and end with L.L.C."	n the words "Limi	ted Liability Company," the de	signation "LLC"	or the abb	reviation		
Enter new principal offices address, if applicable:		22760 Penny Loop	7	: 33 1 35	25.5 ·		
Principal office address MUST BE A STREET ADDRE		Land O Lakes FL. 34	639	; } } } }	Eng Brit		
			1				
Enter new mailing address, if applicable:		22760 Penny Loop		22			
Mailing address MAY BE A POST OFFICE I	Land O Lakes. FL 34	639					
B. If amending the registered agent and/oregistered agent and/or the new registered of			ds, <u>enter the n</u>	ame of 1	the nev		
Name of New Registered Agent:	Tina Cash	<u>.</u>	<del></del>				
New Registered Office Address:	22760 Pen	<del></del>					
	Enter Florida street address						
	Land O Lal		Florida 34639	l ———			
		City .	Zi	p Code			
New Registered Agent's Signature, if changing R	enistered Ament						

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 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: Not changing MGR = Manager MGRM = Managing Member name. Address **Type of Action Title** Name 1 Remove Remove. Remove Remove

Add

Remove

атег	nding any other info	ormation, enter change(s	) here: 1	(Attach additional	sheets, if necess	ary.)
						_
_				<del>,</del>	<del></del>	
_				<del></del>		
	***				*****	
		Sinà				
		Signature of a member or	authorize	ed representative of	a member	
	Tina Cash					
		Typed or	printed na	ame of signee		

Page 3 of 3

Filing Fee: \$25.00

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