## 1000030142

(Re	equestor's Name)			
(Ac	ldress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

G. MCLEOD

AUG 3 0 2012

**EXAMINER** 



800238371668

08/13/12--01013--024 \*\*35.00

15

12 AUG 29 PM 3: 20
SECRETARY OF STATE



## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 16, 2012

ARTHUR J CUMMINS 1111 BISCAYNE BLVD UNIT 1610 MIAMI, FL 33181

SUBJECT: ALL ABOUT KIDS MIAMI, LLC

Ref. Number: L10000030142

We have received your document for ALL ABOUT KIDS MIAMI, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Gina McLeod Regulatory Specialist II

Letter Number: 612A00021149

www.sunbiz.org

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: All About Kids Miami UK  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:
Maria T. Cummins  Name of Person  All About Kids Miam.  Firm/Company
9612 NE 2nd Ave
City/State and Zip Code  Ortober Cooking with kids minmi. con  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Arthur (ummins at (305 753-6644)  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the 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

(A Florida	Elimited Liability Company)
The Articles of Organization for this Limited Liability of Florida document number <u>L100003</u>	Company were filed on March 18 2010 and assigned SO1 42
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	<u> </u>
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADD	RESS)
	## E
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	FLORI 2
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, <u>enter the name of the new</u> dress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Enter Florida street address
	, Florida City Zip Code
New Registered Agent's Signature, if changing Register	·

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

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

	<u>Name</u>	Address	Type of Action
<del></del>			Add Remove
			Add Remove
			Add Remove
			Add Remove
<u></u>			Add Remove
			Add Remove
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	
			<del></del>
Dated	1000		

Page 2 of 2

Filing Fee: \$25.00