1/1000/29537

(Requestor's Name)								
(Address)								
` ,								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(O since First News)								
(Business Entity Name)								
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TO:

INHS18 (2/14)

TO:	Registration Section Division of Corporations							
SUBJ	Just Kids Preschool & Academ	Just Kids Preschool & Academy LLC						
5000		f Limited Liab	nility Company					
Dear S	Sir or Madam:							
The er	nclosed Registered Agent/Registered Office	Change and fe	ee(s) are submitted for filing.					
Please	return all correspondence concerning this n	natter to the fo	Howing:					
Aleja	ndro Perez							
	Name of Person		-					
Just	Kids Preschool & Academy LLC		•					
	Firm/Company		- ;					
906 1	N Krome Avenue		<u>-</u> 					
	Address	-	:					
Hom	estead, Florida 33030		?					
	City/State and Zip Code		<u> </u>					
alexp	perez1985@aol.com							
	E-mail address: (to be used for future annual	report notifica	ation)					
For fu	rther information concerning this matter, ple	ase call:						
Aleja	ndro Perez	786 at (759-2917					
	Name of Person		Area Code & Daytime Telephone Number					
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regi Divis P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 thassee, Florida 32314					
	Enclosed is a check for the following an	iount:						
	☑ \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy					

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. Na	ame of the limited liability company: Just Kids Pre	eschool	& Acader	my LLC		
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	906 N Krome Avenue		906 N K	Krome Avenue		
	Homestead, Florida 33030		Homestead, Florida 33030			
	11/14/2011	L11000129537				
3.	Date of filing/registration in Florida	4.		Document number	er	
5. (a)						
J. (a)	Registered Agent and Registered Office shown on the records o	f the Florio	la Dept. of Sta	ite:		
	Isabel G Perez					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_		
	14307 SW 19 Terrace					
	Miami	. 33175		_		
	Miami , F	L	·	-		
, b)						
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			_	• •	
					· .	
	Alejandro Perez			_	~ ì	1
	NEW Registered Office Address:				,>	3
	906 N Krome Avenue			<u> </u>	.≥ . =	
					នា	
	Homestead	L_33030)	_		
the cha agent v was/we the art	imited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members ignes of organization or the operating agreement of the street of a member of authorized representative of a member	of the reg liability of of the lin e limited Isa	istered offic company, it mited liabili liability co abel G Per	ce and the business is hereby confirme ity company or as ompany. rez Printed or typed nar	s office of the ed that the cha otherwise pro	registered ange(s) wided in
provisi the obi to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complet ligations of my position as registered agent as providely reflect a change in the registered office address, if in writing of this change. When the change is the registered of the change in the registered of the change.	e nerfori	nance of my	· duties and I am I	amiliar with i	and accept