

L13000060737

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(Address)

(Address)

(City/State/Zip/Phone #)

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(Document Number)

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TALLAHASSEE, FLORIDA

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APR 23 2015

K. WHITE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: My Preschool Place, 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:

Shanté M. Reese

Name of Person

My Preschool Place, LLC

Firm/Company

1701 SW 151ST Road

Address

Miami, FL 33185

City/State and Zip Code

CustomerService@MyPreschoolPlace.com

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

For further information concerning this matter, please call:

Shanté M. Reese

at (**786**) **201-0165**

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**

FILED
15 APR 10 PM 1:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

My Preschool Place, LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on April 20, 2013 and assigned Florida document number L13000060737.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: Shanté M. Reese

New Registered Office Address: 1701 SW 151ST Road
Enter Florida street address

Miami, Florida 33185
City Zip Code

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 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.

Shanté M. Reese
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Henry E. Reese	1701 SW 151ST Road	<input type="checkbox"/> Add
		Miami, FL 33185	<input checked="" type="checkbox"/> Remove
AMBR	Henry E. Reese	1701 SW 151ST Road	<input type="checkbox"/> Add
		Miami, FL 33185	<input checked="" type="checkbox"/> Remove
MGR	Shanté M. Reese	1701 SW 151ST Road	<input checked="" type="checkbox"/> Add
		Miami, FL 33185	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Shanté M. Reese is the sole owner and manager of My Preschool Place, LLC.

This is a sole proprietor company. No other names should be listed on any documents. Please remove Henry from everything and add Shanté.

This is effective immediately.

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated April 6, 2015



Signature of a member or authorized representative of a member

Shanté M. Reese

Typed or printed name of signee