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A)	ddress)
(C	ity/State/Zip/Phone #)
	WAIT MAIL
(B	Business Entity Name)
(D	Occument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:
	Office Use Only



08/11/14--01005--013 **30.00



Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314 PremaPlay LLC E: premaplay@gmail.com C: 407-790-5601 F: 321-972-3792

25th July 2014

To Whom It May Concern

RE: Change of Ownership of Prema Pediatric Therapy LLC

Please find attached a copy of the Bill of Sale for Prema Pediatric Therapy LLC, a business registered on Sunbiz under the LLC section. The company was purchased by PremaPlay LLC on the 20th July 2014 and is now solely owned by this Florida Registered Company. PremaPlay LLC is filed as active under the following document number: L14000093585.

Please let me know if you require any further information to make the changes necessary to the register. The business will continue to Do Business As Prema Pediatric Therapy LLC for the time being.

The new Principle Address will be: 6 Newark Road, Bassingham, Lincoln, Lincolnshire, United Kingdom LN5 9HA

The new Mailing Address will be: 917 N Pennsylvania Avenue, Winter Park, FL 32789

The new Registered Agent Name and Address is: Dray, Rebecca, 2413 E Winter Park Road, Winter Park, FL 32789

Many thanks,

Rebecca Dray Owner/Manager Prema<u>Play</u> LLC

BILL OF SALE

KNOW ALL MEN BY THESE PRESENTS:

That Prema Pediatric Therapy LLC, a Florida based company, in consideration of the sum of Forty Thousand Dollars (\$40,000) and other matters as stated in the Sale of Assets Agreement executed on 4th June 2014, does hereby sell, assign, transfer and set over unto PremaPlay LLC, immediately, all of its rights, title and interest in and to the assets described in Schedule A set forth below.

The sale only includes those assets specified in Schedule A.

To have and to hold the same unto said PremaPlay LLC, Rebecca Sarah Dray, her successors and assigns forever.

Dated this 10th of June 2014.

Prema Pediatric Therapy

By: Scent KERTON-LOCASCIO

Title: MS.

Page 6 of 7

COVER LETTER

TO: Registration Section Division of Corporations

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SUBJECT: Prema Pediatric Therapy 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:

Rebecca Dray

Name of Person

PremaPlay LLC

Firm/Company

2413 E Winter Park Road

Address

Winter Park FL 32789

City/State and Zip Code

premaplay@gmail.com

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

For further information concerning this matter, please call:

Rebecca Dray

Name of Person

407 7905601

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)

Area Code

□ \$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

Prema Pediatric Therapy 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 06/11/2013	and assigned
Florida document number L13000084516	

This amendment is submitted to amend the following:

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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:	2413 E Winter Park Road Winter Park		
(Principal office address MUST BE A STREET ADDRESS)			
	FL 32789	je v r manie stanie s	
Enter new mailing address, if applicable:	as above		
(Mailing address MAY BE A POST OFFICE BOX)		· -·.	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		cords, enter the name of the new	

Name of New Registered Agent:	Rebecca Dray	
New Registered Office Address:	2413 E Winter Park Road	
	Enter Flori	ida street address
	Winter Park	, Florida <u>32789</u>
	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.

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	Type of Action
AMBR	Rebecca Dray	2413 E Winter Park Rd	📕 Add
		Winter Park	
		Florida, 32789	
MGRM	Susan A Kerton	2645 Tierra Circle	□ Add
		Winter Park	Remove
		FL 32792	
			🖸 Add
			Remove
			 🖸 Add
		·	C Remove
			Add
			Remove
			🗆 Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) The company has been purchased by PremaPlay LLC document number L14000093585 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) (optional) Dated August 1st 2014 0 Signature of a member or authorized representative of a member SUSAN KERTON Typed or printed name of signce

Page 3 of 3 Filing Fee: \$25.00

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