L/3000/69/25

(Requestor's Name)
(Address)
(Address)
,
(0) (0) (7) (0)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(2004.10.10.10.1)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
· ·

Office Use Only



900279848809

12/09/15--01003--010 **25.00

TO ACKNOWLEDGE SUFFICIENCY OF FILING 15 DEC -9 PH 12: 09

18 CEC -9 PK D: 11

K.SALY EXAMINER DEC -9 2015

COVER LETTER

SUBJECT: Qual	ty Child Cane Name of Limi	Connection, LLC ted Liability Company	
The enclosed Articles of A	amendment and fee(s) are subm	nitted for filing.	
Please return all correspon	dence concerning this matter t	to the following:	
	S. Frances	Allew Name of Person	
	All Saints Ang	lican Chunch of 7.	allahassee, Fnc,
	3840 NORTHY	Monroe Street, Uni	£ 303
	<u>Tallahassee</u> <u>fallen_323</u>	City/State and Zip Code O 8 6 49 hoo Com o be used for future annual report notifi	
For further information co	E-mail address: (t incerning this matter, please ca	-	cation)
Si Fagnces A Name of	//en Person	at (<u>850</u>) <u>570-6</u> Area Code Daytime	7672 Telephone Number
Enclosed is a check for the	e 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)
	□ \$30.00 Filing Fee &	Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

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

GUALITY CHILD CHE	E CUNNET FON DEC
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.)*////////////////////////////////////
The Articles of Organization for this Limited Liability Company Florida document number <u>L1300169125</u> .	were filed on DEC. 6, 2013 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity 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 of registered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
4	, Florida
	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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Emily Moore	3945 North Monroe Street	Add
		Tallahassee, FL 32303	⊠ Remove
			□ Change
mer	S. Frances Allen	1317701d Settlement Road	□ Add
		Tallahassee, FL 32309	⊠ Remove
			Change
AMBR	Jean Williams	1921 Sharon Road	🗆 Add
		Tallahassee, FL 32303	Remove
			Change
AMBR	ken klos	383 Castleton Circle	D'Add
		Tallahassee, FL 32312	Remove
			Change
AMBR	Trauls Boline	3945 North Monroe Street	🗆 Add
		Tallahassee, FL 32303	K Remove
			Change
MGR	All Saints Anglican	3945 North Monroe Street	_ j⊠ Add
	Church of Tallahasree, Inc	Tallahassee, FL 32303	Remove
			_□ Change

. If amending any other information, enter change(s) here: (Attach additional sheet	s, y necessary.	
		•
		į
	हिंस न	
	and the latter of the latter o	
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 Note: If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records.	days after filing.) Pursuant to 605.020	
f the record specifies a delayed effective date, but not an effective time, at b). The 90th day after the record is filed.	12:01 a.m. on the earlier o	f:
Dated DECEMBER 9, 2015		
Signature of a member or authorized representative of a member		
Signature of a member or authorized representative of a member of a LLEN	er	

Page 3 of 3

Filing Fee: \$25.00