L13000174885

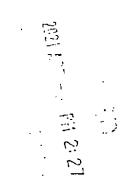
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Office Use Only



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COVER LETTER

Registration Section
Division of Corporations

TO:

ASDA NEW	VBORN & CHILD CARE SEI	RVICES LLC .			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of z	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspon	ndence concerning this matter	to the following:			
	Andrea Linton				
		Name of Person			
		Firm/Company	<u> </u>		
	314 Drum Ct	Address			
	Kissimmee Fl 34759	Address			
		City/State and Zip Code	 ,		
	andrea.linton316@gmail.co	m to be used for future annual report not	ification)		
For further information ec	oncerning this matter, please ca	·			
Andrea Linton		407 334 4182at ()			
Name of	Person	Area Code Daytin	ne Telephone Number		
Enclosed is a check for th	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)		
Mailing Address Registration S Division of Co P.O. Box 632	ection orporations	Street Address: Registration Se Division of Co The Centre of T	rporations		
Tallahassee, F	TL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ASDA NEWBORN & CHILD CARE SERVICES LLC

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

	(A Florida Limited I	nability Company)	
The Articles of Organization for this Limited L Florida document number L13000174885	Liability Company	were filed on December 19th 2013	and assigned
Florida document number	·		
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
ASDA BABY & NEWBORN CARE SERVICES	LLC		
The new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the designation "LLC" or the at	breviation "L.L.C."
Enter new principal offices address, if applic	cable:	N/A	
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE	· BOX)		
Truming data Co. MATT DISATE OUT WITTEL	131717		
	`	All and a second and a second by the second	6415-2
B. If amending the registered agent and/or agent and/or the new registered office addresses	•	address on our records, enter the nam	e of the new registered
agent and/or the new registered office addre			33
	N/A		71
Name of New Registered Agent:			- C.
New Registered Office Address:	N/A		-
New Registered Office Hadress.		Enter Florida street address	2:
		Pl 11.	. 2
		, Florida City	Zip Code
Now Designated Agent's Company of shancing	Pagistama Agants		
New Registered Agent's Signature, if changing			
I hereby accept the appointment as registered provisions of all statutes relative to the propaccept the obligations of my position as region being filed to merely reflect a change in the company has been notified in writing of this	per and complete istered agent as p registered office	performance of my duties, and I am j provided for in Chapter 605, F.S. Or,	familiar with and if this document is

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
		N/A	
			□Remove
			□Change
			□Add
			□ Remove
			☐ Change
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ective date.	if other tha	n the date of	N/A				_ (optional)	•	
reffective date.	is listed, the da	ite must be socc	ific and canno	t be prior to da	ite of filing or	more than 90 d	ays after filing	.) Pursuant to 605. will not be liste	.020 ed a
ument's effec	ctive date on	the Departme	ent of State's	records.	statutory in	ing requireme	ms, ms am		
cord specifies	s a delayed ef	fective date, b	out not an eff	fective time.	at 12:01 a.m	on the earlie	er of: (b) T	he 90th day after	r the
s filed.									
, March 19	րի 2021								
ted			 ;	:					
		An	NO	12.00	-				
		Signatu	re of a member	r or authorize	representativ	ve of a member	.		
			,						

Filing Fee: \$25.00