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D SCOTT JAN 6 2017 To whom may it may concern:

The authorized representative of Sinclair Daycare LLC, Joshua Sinclair, was baker acted on December 14th to 16th. Currently he was taking out business capital from business bank account for his personal uses. All employee feel he is kind of insane. We decided to remove him as the AMBR of the company, instead ask Chao Gao, the 99% shares holder to operate and manage the company.

Enclosed, please find the consideration.

Sincerely,

CHAO GAO

1020

January 4, 2017

COVER LETTER

TO: Registration Section , Division of Corporations
SUBJECT: SINUAIR DAYCARE, LLC Name of Limited Liability Company
Name of Limited Diability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
CHAO GAO
Name of Person
SINCLAIR DAYCARE, LLC Firm/Company
374 SCOTT AVE.
Address
SARASOTA, FL 34207 City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SHERRY DIXON a. 941 355-8741
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S30.00 Filing Fee & Certificate of Status 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

	CARE, LLC	
(<u>Name of the Limited Li</u> (A F	iability Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liabil Florida document number <u>しりのりしまり</u>	ity Company were filed on <u> </u>	and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A.	DDRESS)	<u></u>
		
Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·	
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent: New Registered Office Address:	registered office address on our records, ente address here: Enter Florida street address , Florida	FILED # 57
-	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
AMBR	JOSHUA TEANCUM SINCLA	IR 8210 LAKEWOOD RANCH BLU) Add
•		LAKEWUUD RANCH, FL 30202	Remove
			Change
AMBR	CHAO GAO	8210 LATEWOOD RANCH BLVD	: Add
		LAKEWOOD RANCH, FL 3420	<u></u> □ Remove
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	002	Signature of a	nember or autho	rized representat	ive of a memb	er		
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Page 3 of 3

Filing Fee: \$25.00