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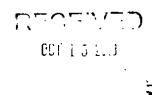
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## **COVER LETTER**

TO: Registration Sec Division of Corp				
SUBJECT: <u>A</u> B	righter Future Name of Limi	e Preschool and ted Liability Company	d Daycare LLC	
The enclosed Articles of A	mendment and fee(s) are subt	nitted for filing.		
Please return all correspon	dence concerning this matter	to the following:		
	_ Elizabeth	Soinski Name of Person		
	A Brighter	Future and P	reschool LLC	
	7323 FLOR	LAL DR.	SECRE SECRE	
	Spring Hil	1, FL. 34007 City/State and Zip Code	TARY O	FILED
	te 4 eas a	yahuo, com o be used for future annual report notifi	Cation)	Ö
For further information con	ncerning this matter, please ca		(E) A	
E112abrth Name of	<u>Sainski</u> Person	at ( <u>727</u> ) <u>303</u> Area Code Daytime	7973 Telephone Number	
Enclosed is a check for the	following amount:			
ਤ \$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

Future Preschool and Daycare LLC

(A Florida Limited	Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on $10   02   2015$ and assigned
Florida document number <u>L15000163093</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liab:	ility Company," the designation "LLC" or the abbieriation."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	ASSEE. A
Enter new mailing address, if applicable:	7828 FLORAL ARE
(Mailing address MAY BE A POST OFFICE BOX)	SPRING HILL, FL STOP
registered agent and/or the new registered office address her	office address on our records, enter the name of the new re:
* Name change only*  Name of New Registered Agent: Eliza	ibelh Soinski
New Registered Office Address: 7923	Floral Dr.  Enter Florida street address
Spring	HIII
Jow Pagistered Agent's Signature if changing Pagistered Agent	•

lew Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ecept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is sing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability ompany 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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MBE	Alycia Ropero Bayona	4400 Caliquer Dr.	Ndd
	•	1400 Caliquer Dr. Brooksville, FL. 34604	□ Remove
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reffective date is listed, <u>te:</u> If the date insert	, the date must be speced in this block doe		or to date of filing or r cable statutory filir	(option none than 90 days after the requirements, this	filing.) Pursuant to 605	
record specifies he 90th day afte			ot an effective	time, at 12:01 a.	.m. on the earli	er of
ed <u>Cct.</u>	9	<u> 2018</u>			ECRETA	, } -
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Filing Fee: \$25.00