

L17 0000 17660

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

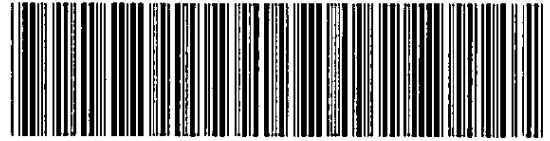
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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09/09/2014 01:25:02 4.00.00

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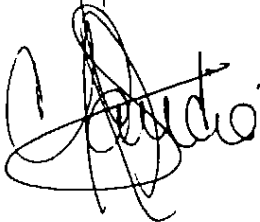
OCT 14 2020

To Whom it may concern,

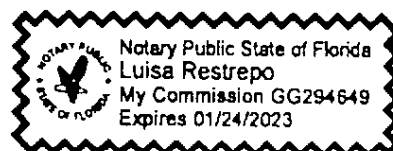
The purpose of this note is to confirm that the Amendment made by Carlos Rodriguez on 08/18/2020 is completely false and illegal, it was not authorized me Claudia Prats the sole owner of Prats Early Learning Academy LLC since January 23<sup>rd</sup> 2017. This is considered a theft and there will be legal actions against this subject.

Please I need this new amendment to take effect immediately, and do not happen again in the future.

o Claudia Prats



STATE OF FLORIDA COUNTY OF Miami Dade  
Sworn to (or affirmed) and subscribed before me by means  
☒ physical presence or ☐ online notarizations  
This 26 day of August, 2020  
By: Claudia Prats  
Personally Known        OR produced identification ✓  
Type of Identification Produced FL ID  
Luisa Restrepo 01/24/2023  
NOTARY NAME HERE, Notary Public My commission expires



## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Prats Early Learning Academy 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:

Claudia Prats

\_\_\_\_\_  
Name of Person

Prats Early Learning Academy

\_\_\_\_\_  
Firm/Company

5490 West 12 Ave

\_\_\_\_\_  
Address

Hialeah FL 33012

\_\_\_\_\_  
City/State and Zip Code

pratsclaudia@yahoo.com

\_\_\_\_\_  
E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Claudia Prats

305 8773196

at ( )

\_\_\_\_\_  
Name of Person

Area Code

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)

☒ \$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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

44-38861-1000

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

L17000017660

**A. If amending name, enter the new name of the limited liability company here:**

**Enter new principal offices address, if applicable:**

**Enter new mailing address, if applicable:**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Clandia Prats

7040 NW 177 St APT# 2000

Enter Florida street address

## Hidden:

Florida 33015

(iii)

*Zip Code*

*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**

**MGR =** Manager  
**AMBR =** Authorized Member

[illegible]

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

THE AMMENDMENT MADE ON 08/18/2020 BY CARLOS RODRIGUEZ IS COMPLETELY FALSE AND  
ILLEGAL. IT WAS NOT AUTHORIZED BY ME CLAUDIA PRATS THE SOLE OWNER OF PRATS  
EARLY LEARNING ACADEMY LLC SINCE JANUARY 23RD 2017. THIS IS CONSIDERED A THEFT  
AND THERE WILL BE LEGAL ACTION AGAINST THIS SUBJECT. PLEASE I NEED THIS NEW  
AMENDMENT TO TAKE EFFECT IMMEDIATELY.

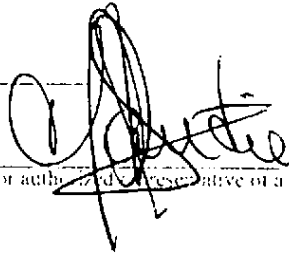
**E. Effective date, if other than the date of filing:** 08/18/2020 **(optional)**

*(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated AUGUST 26 2020

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

CLAUDIA PRATS

\_\_\_\_\_  
Typed or printed name of signer

**Filing Fee: \$25.00**