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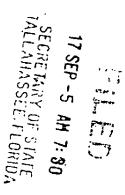
(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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## **COVER LETTER**

	Registration Division of C						
cupiec		and Curriculum Consulting, LLC					
SUBJEC	Name of Limited Liability Company						
The enclo	osed Articles	of Amendment and fee(s) are sub-	mitted for filing.				
Please ret	turn all corres	pondence concerning this matter	to the following:				
		Jannette Alvarez					
			Name of Person				
		Daycare and Curriculum C	onsulting, LLC				
			Firm/Company				
17081 NW 89 Avenue							
			Address	<del></del>			
		Miami Lakes, FL 33018					
			City/State and Zip Code				
		jannettealvarez0808@hotma					
		E-mail address: (	to be used for future annual report notif	ication)			
For further	er information	n concerning this matter, please ca	all:				
Jannette .	Alvarez		786 444-2719				
	Nam	e of Person	Area Code Daytime	: Telephone Number			
Enclosed	is a check for	r the following amount:					
□ <b>\$</b> 25.0	0 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

ity Company)  re filed on 8/30/2017 and assigned	
e filed on 8/30/2017 and assigned	
company here:	
ompany," the designation "LLC" or the abbreviation "L.L.C."	
17081 Nw 89 Avenue	
iami Lakes, FL 33018	
17081 NW 89 Avenue Miami Lakes, FL 33018	
address on our records, enter the name of the	
TAL S	
LAN LAND	
<b>三角 何</b> "雨	
Enter Florida street address	
City Florida Zip Side I	
,	

If Changing Registered Agent, Signature of New Registered Agent

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 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

Title	Name	<u>Address</u>	Type of Action
MGR	Jannette Alvarez	17081 NW 89 Avenue	<b>≅</b> Add
		Miami Lakes, FL 33018	□ Remove
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		S <sup>**†</sup>
ffective date, if other than the	e date of filing:	(optional)
an effective date is listed, the date mu	ist be specific and cannot be prior to date of filing o	or more than 90 days after filing.) Pursuant to 605,0207
locument's effective date on the D		iling requirements, this date will not be listed as
		re time, at 12:01 a.m. on the earlier of
		•
		,
The 90th day after the rec	cord is filed.	•
e record specifies a delaye The 90th day after the rec Dated August 31		
The 90th day after the rec	2017	
The 90th day after the rec	cord is filed.	

Page 3 of 3

Filing Fee: \$25.00