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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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COVER LETTER

Division of Corporations
SUBJECT: My Precious Kidz 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:
Sunshine Henriette Justice Name of Person
Firm/Company
2514 W. Coloniau Dr Address
Orlando 71 32804 City/State and Zip Code
My Precious Kid Z. Academ 42018@4000 . com E-mail address! (to be used for future annual report notification)
For further information concerning this matter, please call:
Sunstine Justice at (407) 283-0975 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Solution Status Solution Solut

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, F1. 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on _______________________________and assigned Florida document number <u>L1</u>80000 Z 3636 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent: New Registered Office Address:

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

Enter Florida street address

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>	Name EV	Address	Type of Action
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Note: If the date	if other than the is listed, the date mus inserted in this blo stive date on the Do	ock does not meet	t the applicable s	of filing or more th tatutory filing req	(option: an 90 days after fili uirements, this da	al) ng.) Pursuant to 605.0 ne will not be listed	0207 d as
e record spec The 90th da	cifies a delayed y after the rec	l effective dat ord is filed.	e, but not an	effective time	, at 12:01 a.n	n. on the earlie	er of
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		Signature of a men	nber or authorized	Justice Justice			

Page 3 of 3

Filing Fee: \$25.00