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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: TWO by Two Preschool of Beach
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lauren Karaharos Name of Person
Firm/Company
9 Fishermans Circle # 8
Ormond Beach, FL 32174 City/State and Zip Code twoobytwopreschoolob@gmails.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lauren Karahairos at 386 283-2912 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Scriticate of Status Status Scriticate of Status Scrit

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

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

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on (0)151008 and assigned

Florida document number 1800014833

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 "LLC."

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 Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

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>	<u>Name</u>	Address	Type of Action
MGR	Lauren Karahalios	Address 9 Fishermans Circle Ormand Beach, FL 32174	XAdu
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ective date, if other than the date of filing:	(optional) r more than 90 days after filing.) Pursuant	to 605.03
te: If the date inserted in this block does not meet the applicable statutory figurent's effective date on the Department of State's records.	ling requirements, this date will not b	e listed
and a creense date on the Department of Blate & Technia.		
record specifies a delayed effective date, but not an effective	e time, at 12:01 a.m. on the	earlier
he 90th day after the record is filed		_: ,,
Lauren Karahalius Signature of a member or authorized representat		
ted JUNE dd. dol8.		
Jan Wardan Ottor		
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00