

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210000079363)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: GENERAL SOLUTIONS INC

Account Number : I20140000086

Phone

: (305)255-3310

Fax Number : (305)255-3320

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

LLC AMND/RESTATE/CORRECT OR M/MG **RESIGN**

KIDS BE KIDS LEARNING ACADEMY LLC

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Estimated Charge

\$25.00

Electronic Filing Menu

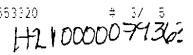
Corporate Filing Menu

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Help

ResendOf-37-21;11:54AM; General Solutions INC

ARTICLES OF AMENUMENT TO ADDICT ES OF ODC ANTZATIO



ARTICLES OF ORGANIZATION OF

KIDS BE KIDS LEARNING ACADEM		
(Name of the Limited Linbility C (A Florida Lin	ompany as it now appears on e nited Liability Company)	our records.)
he Articles of Organization for this Limited Liability Com	pany were filed on 08/01/20	018 and assigned
lorida document number L18000185099		•
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	l liability company here:	
KIDS BE KIDS PRESCHOOLS LLC		
he new name must be distinguishable and contain the words "Limited	Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	N/A	22
Principal office address MUST BE A STREET ADDRES	SS)	<u> </u>
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a de la completa del completa de la completa de la completa del completa de la completa del la completa de la completa del la completa de	N/A	SSE Z
Enter new mailing address, if applicable:		5 to 0
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	۲: 2 ۳: 25
 If amending the registered agent and/or registered or egent and/or the new registered office address here: 	ffice address on our recor	ds, enter the name of the new regist
N/A		
Name of New Registered Agent:	•	
Name of New Registered Agent: New Registered Office Address:	Enier Florida s	treet address
	Enter Florida s	rreet address , Florida

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

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Resenced-07-21;11:54AM; General Solutions INC ;3052553320 ;3052553320 amending Authorized Person(s) authorized to manage, enter the title, name, and address of enter person # 4/ 5 or removed from our records:

H210000079363

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
		N/A	
			□Remove
			Change
			□Add
			□Remove
			Change
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Effec	tive date, if other than the date of filing: (optional) (fective 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
f an et	ffective 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docur	nent's effective date on the Department of State's records.
rcco d is f	rd 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 filed.
	1 JANUARY 7 , 2021
	·
Dated	
Dated	Van Cessio
Dated	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00