N8000283103

(F	Requestor's Name)
(<i>f</i>	Address)
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SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

	ration Sect on of Corpo					
Si	mply Kids.	LLC		•		
SUBJECT:		Name of Lim	ited Liability Company			
The ample and A	→ialas of A	mendment and fee(s) are sub	mirrod for filing			
		dence concerning this matter				
		Nicole Nadeau				
			Name of Person			
		Simply Kids, LLC				
			Firm/Company			
	13014 N. Dale Mabry Hwy. STE 213					
			Address			
		Tampa, FL 33618				
		info@simplykidspreschool	City/State and Zip Code		2022 AUG SECRETA TALLA	
			to be used for future annual report no	otification)	AUG RE1	
For further info	rmation con	ncerning this matter, please c	ali:		7.19 7.184 7.184	2 73m
Nicole Nadeau			727 831-8198		SSES SOF MA	in and
	Name of F	Person		me Telephone Number	STATE E. FL	•
Enclosed is a ch	eck for the	following amount:				
■ \$25.00 Filir	ng Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status &	
	g Address:		Street Address:			
_	tration Se ion of Cor	ection rporations	Registration S Division of Co			
	3ox 6327	-	The Centre of			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Simply Kids, LLC		
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears on our records.) bility Company)	
The Articles of Organization for this Limited Liability Company w	ere filed on	and assigned
Florida document number L18000283103		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	ty company here:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbrev	ation "L.L.C."
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)		
		S 전 2011
	,	OR P
B. If amending the registered agent and/or registered office ad	dress on our records, enter the name of	themew Pegisterer
agent and/or the new registered office address here:		<u> </u>
Name of New Registered Agent:		Ties -
New Registered Office Address:	i	<u>"B</u> 5
	Enter Florida street address	
	, Florida	
	City	tip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	erformance of my duties, and I am fami ovided for in Chapter 605, F.S. Or, if th	liar with and iis document is

If Changing Registered Agent, Signature of New Registered Agent

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	Philip Metzler	13014 N. Dale Mabry Hwy. STE 213 Tampa,	Fl 33618
			□Remove
			Change
			
		·	🗆 Remove
			Change
			□Add
			SECRETA GAMBO
			工 家
	. <u></u>		SSEE, FL
			□ Change
			□ Add
			□Remove □Change

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	<u>.</u> .					2
Effective date, if other than If an effective date is listed, the date	n the date of filing:	annot be prior to di	te of filing or more t	(options	al) ng.) Pursuant	to 605.0207
Note: If the date inserted in the document's effective date on the	his block does not me	et the applicable	statutory filing rec	quirements, this da	ate will not b	be listed as
e record specifies a delayed ef	fective date, but not a	in effective time,	at 12:01 a.m. on th	ne earlier of: (b)	The 90th da	y after the
rd is filed.						
08/16/ Dated		2022	4			
	//~					
		7// 6	d representative of a		_	

Filing Fee: \$25.00

Typed or printed name of signee