L20000392044

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(City	y/State/Zip/Phone	e #)
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COVER LETTER

TO:	Registration Se Division of Cor			
	Jannie's Da	yeare, LLC.		
SUBJE	СТ:	Name of Limi	ited Liability Company	
The end	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		Jannie P. Small		
		Jannie's Daycare, 11.C.	Name of Person	
			Firm/Company	
		1518 28th St. So.		
			Address	
		St. Petersburg, FL. 33712		
		jannie_small@yahoo.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notific	ation)
		oncerning this matter, please ca		
Jannie	P. Small		727 599-9851	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclose	ed is a check for th	ne following amount:		
₩ \$25	5.00 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 Addres Registration S	Section	Street Address: Registration Sect	
	Division of C	Corporations	Division of Corp	orations

P.O. Box 6327 Tallahassee, FL 32314

TO:

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

on our records.)		
he Articles of Organization for this Limited Liability Company were filed on L20000392044 lorida document number		_ and assigned	
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ida street address			
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	re: esignation "LLC" of the cords, enter the cords of the	esignation "LLC" or the abbrev	and as signation "LLC" or the abbreviation "I signation "LLC" or the abbreviation "I signation "I signature the abbreviation abbreviation "I signature the abbreviation abbreviati

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.

City

Zip Code

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>	<u>Address</u>	Type of Action
AMBR	Jamila Ross	1016 24th St. So., St. Petersburg, FL. 33712	□Add
			Remove
			□Change
AMBR	Jannie P. Small	1518 28th St. So. , St. Petersburg, FL. 33712	= Add
			□ Remove
. (0)			□ Change
MGR	Мута Ross	1510 28th St. So., St. Petersburg, FL. 33712	□Add
			≅ Remove
			□Change
MGR	Jannie P. Small	1518 28th St. So. , St. Petersburg, FL. 33712	■ Add
			□ Remove
			□Change
			□Add
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Effective date, if other than t	he date of filing:	to date of filing or many them	(optional)	าร กวกว
Note: If the date inserted in this	s block does not meet the applic	cable statutory filing requi	rements, this date will not be list	sted as
document's effective date on the	: Department of State's records	i .		
e record specifies a delayed effect	tive date, but not an effective t	ime, at 12:01 a.m. on the	earlier of: (b) The 90th day aft	er the
rd is filed.				
January 22	2021			
Dated	,	·		
()_	on D. K. LAD			
70,	W r small	norized representative of a mo		
	 Signature of a member or auth 	ionzed representative of a me	mber	
Jannie P. Small	(Signature of a member or auti	ionzed representative of a mo	mber	

Filing Fee: \$25.00