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Division of Corporations

# **Re**partanent of State...

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### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FANTASTIC ADULT DAYCARE LLC

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#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FANTASTIC ADULT DAYCARE LLO		
( <u>Name of the Limited L</u> (A F	iability Company as it now appears on our relonda Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liabil Florida document number 1.22000457958		and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	· · · · · ·	2024 HA
The new name must be distinguishable and contain the words	"Limited Liability Company." the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	DDRESS)	SE - 5
	<del></del>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO.	<u>v</u>	
B. If amending the registered agent and/or regis agent and/or the new registered office address he	<del>-</del>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	dáress
_	City	, Florida
	uii) <sup>y</sup>	ing com

#### 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 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

Title	<u>Name</u>	Address	Type of Action
AMBR	MAGALY CHANG	6878 SW 24TH ST	Add
		MtAME FL 33155	
			☐ Change
			□Add
			Remove
			☐ Change
			CIAdd
			□Remove
			\ \ \ \ \ \tange
			□Add
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			DChange
			🗆 Add
			□Remove
			☐ Change
			□Add
			Пкепюче
			Change

D. If amo	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ate, if other than the date of filing:
If the recor	eifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	4/ 2024
Carea	No.
	Signature of a member or authorized representative of a member

2024-03-04-20-47-29 GMT

13053284774

From, Yanet Avila

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To: