MECCOCEHII

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 12, 2018

MARY FALDUTO 210 HILLSBORO TECHNOLOGY DR DEERFIELD BEACH, FL 33441

SUBJECT: CHILDCARE DEVELOPMENT-FLORIDA, LLC

Ref. Number: M16000008411

We have received your document for CHILDCARE DEVELOPMENT-FLORIDA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 218A00004936氢

2018 MAR 26 PH 1: 2
DEPARTMENT OF STATE
TALLAHASSFF FF PRATIE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Childcare Development-Flor	
Name of Foreign Limited Liab	bility Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are submitted	for filing.
Please return all correspondence concerning this matter to the	following:
Mary Falduto	
Name of Person	
The Learning Experience	
Firm/Company	
210 Hillsboro Technology Drive	
Address	- 2018
Deerfield Beach, FL 33441	2011 NAR 2
City/State and Zip Code	20 5
mfalduto@tlecorp.com	
E-mail address: (to be used for future annual report notification)	ation) $\widehat{\mathbb{S}}_{n}$ ω
For further information concerning this matter, please call:	
Mary Falduto	, 886-6400
at (e & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
_	ing Fee & S60 Filing Fee, ed Copy Certificate of Status & Certified Copy

CR2E055 (9/15)

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT **BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

Name of limited liability Company as it appears State: Childcare Development-Flor		Department of
Enter new principal office address, if applicable:		
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)		
Enter new mailing address, if applicable: (<u>Mailing address</u> <u>MAY BE A POST OFFICE BOX</u>)		
2. The Florida document number of this limited lia	bility company is: M16000	0008411
3. Jurisdiction of its organization: Delaware		
4. Date authorized to do business in Florida: 10/	17/2016	
SECTION II (5-9 complete only the applicable o	changes)	20 20 20 E
New name of the limited liability company: (must	t contain "Limited Liability Co	
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or mar must contain "Limited Liability Company," "L.L.C	naging members adopting the a	business in Florida and attach a Iternate name. The alternate name
6. If amending the registered agent and/or registere registered agent and/or the new registered office ad	d officer address on our record	ls, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florid	da Street Address
		, Florida Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Re		city. I further garee to comply w

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.

itle/ Capacity	<u>Name</u>	Address Type of Actio
Scott Anderson	Scott Anderson	210 Hillsboro Technology Drive ■Add
		Deerfield Beach, FL 33441 Remo
		Add
		Remo
		Add
		Remo
		2 Remov
	•	Remov

Filing Fee: \$25.00