N07000009901

(Requestor's Name)
(Address)
, (Address)
(City/State/Zip/Phone #)
(City/State/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





300138494653

12/22/08--01022--020 **43.75

ECRETARY OF STATE

on Sold

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Thinking	Child Educational Programs, Inc.
DOCUMENT NUMBER: N0700000990)1
The enclosed Articles of Amendment and fe	ee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Angela Pinaglia	,
(Na	me of Contact Person)
Thinking Child Educational	
	(Firm/ Company)
155 NW 4th Street	
·	(Address)
Homestead, FL 33030	y/ State and Zip Code)
For further information concerning this matter	
Angela Pinaglia	at (305) 247-3036
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount	nt made payable to the Florida Department of State:
\$35 Filing Fee	Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee & Certificate of Statu Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Thinking Child Educationa (Name of Corporation as currently filed with	Programs, Inc.	E
N070000099		8
(Document Number of Corporat	ion (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes the following amendment(s) to its Articles of Incorporation:	, this <i>Florida Not For Profit</i> (Corporation adopts
A. If amending name, enter the new name of the corporatio	<u>n:</u>	
The Thinking Child Academy School, Inc.		•
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may not	"corporation" or "incorpor t be used in the name.	ated" or the
B. Enter new principal office address, if applicable:	No Change	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
		- <u>}</u>
	4———	
0 7		22 ASS
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	No Change	n
		F.C. 3. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6.
•		— <u>0 </u>
	•	9 m 6
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade		e name of the
Name of New Registered Agent: Angela Pinac	ılia	
155 NW 4th 5	Street	
New Registered Office Address: (Flori	ida street address)	
Homestead	. Flo	orida 33030
	(City) (Zip Code)
Nav Dagistarad Agant's Signatura if shausing Dagistarad A	aont.	
New Registered Agent's Signature, if changing Registered A lereby accept the appointment as registered agent. I am	familiar with and accept the	obligations of the
position.		
Signature of Nour	Registered Agent if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

Title	<u>Name</u>	Address	Type of Action
<u>P</u>	Noelia Montaner	155 NW 4th Street Homestead, FL 33030	Add 2 Remove
<u>P</u>	Angela Pinaglia	155 NW 4th Street Homestead, FL 33030	Add Remove
<u>Sec</u>	Christine Vera	155 NW 4th Street Homestead, FL 33030	Add Remove
(attach ac Article III (This organ distribution	ting or adding additional Articles, enditional sheets, if necessary). (Be specified the content of the corresponding of the corresponding of the corresponding to the corresponding of the correspondi	for educational purposes, the sexempt organizations under	Section 501(c)(3)
	,		

The date of each amendment(s) adoption: 12/01/08				
Effective date if applicable:	12/01/08			
	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/we was/were sufficient for app	are adopted by the members and the number of votes cast for the amendment(s) roval.			
There are no members or adopted by the board of dis	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.			
hav	the chairman or vice chairman of the board, president or other officer-if directors on the been selected, by an incorporator – if in the hands of a receiver, trustee, over court appointed fiduciary by that fiduciary)			
	Angela Pinaglia (Typed or printed name of person signing)			
	President			
	(Title of person signing)			

Page 3. of 3