Florida Department of State

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COR AMND/RESTATE/CORRECT OR O/D RESIGN ABC KINDERGARTEN & KINDERCARE INC.

Certificate of Status	0
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Corporate Filing Menu

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ABC KINDER	GARTEN 8	KINDERO	CARE INC.
DOCUMENT NUM	BER: N10000002517		CONTROL CONTRO	
The enclosed Articles	of Amendment and fee are sub	mitted for filin	ıg.	
Please return all corre	spondence concerning this matt	er to the follov	wing:	
·		Burroughs		
	(Name of	Contact Person	n)	
********		om.com, Inc	c.	
	(Firm	/ Company)		
	7083 Hollywe	ood Blvd. St	e. 180	
		(ddress)		······
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**************************************	robert_williams2@			
	E-mail address: (to be used	i for future ani	nuai report notii	neation)
For further information	on concerning this matter, please	call:		
Tony Burroughs		at (32:	3 ₎ 962-8	600 vtime Telephone Number)
(Name	of Contact Person)	(Ai	rea Code & Day	time Telephone Number)
Enclosed is a check for	or the following amount made p	ayable to the F	lorida Departm	ent of State:
□\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☑ \$43.75 Certified C (Additiona enclosed)	ll copy is	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy
Amen Divisi P.O. £	ng Address dment Section on of Corporations Box 6327 hassee, FL 32314	An Dir Cli 26	reet Address nendment Section vision of Corpora ifton Building 61 Executive Cer Ilahassee, FL 323	ations nter Circle

Articles of Amendment to Articles of Incorporation

Articles of Incorporation of ABC KINDERGARTEN & KINDERCARE INC.

N10000002517

(Name of Corporation as currently filed with the Florida Dept, of State)

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of	•			
Chiefland Dayo	care & Learning Center Inc.			
The new name must be distinguishable and abbreviation "Corp." or "Inc." "Company"	contain the word "corporation" or "			
B. Enter new principal office address, if ap (Principal office address MUST BE A STREE		FI TO OCT 1 SECRETAL ALLAHAS		
C. Enter new mailing address, if applicable (Muiling address MAY BE A POST OFF)		3 PH 12: 02		
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent:				
New Registered Office Address:	(Florida street address)			
	(City)	, Florida (Zip Code)		
New Registered Agent's Signature, if change I hereby accept the appointment as registere position.		ccept the obligations of the		
	Signature of New 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)				
<u>Title</u>	Name		<u>Address</u>	Type of Action
				☐ Remove
		 		
				Remove
E. If amen	iding or adding add additional sheets, if n	itional Articles, c ecessary). (Be s	nter change(s) here: pecific)	
			· · · · · · · · · · · · · · · · · · ·	
	t name and a state of the state			

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The date of each amendment(s) adoption: 10/06/10
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendment(s) val.
There are no members or me adopted by the board of direct	embers entitled to vote on the amendment(s). The amendment(s) was/were ctors.
10/ Dated	11/10
Signature	Lobert L'Williams
have	ne chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	Robert Williams
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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