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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Lil Scholars Learning Academy Inc Name of Corporation	
DOCUMENT NUMBER: N12000000296	
The enclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this r	-
rease return an correspondence concerning this i	matter to the following.
Sybrenda G Johnson	
Name of Contact Person	<del></del>
Lil Scholars Learning Academy Inc	
Firm/Company	<del></del>
PO Box 744	
Address	<del></del>
Hawthorne FL 32640	
City/State and Zip Code	
scholarsacademy352@gmail.co	om
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, pl	ease call:
Sybrenda Johnson	21 (407 )716-2119
Name of Contact Person	at (407 )716-2119  Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the E	Department of State.
Mailing Address: Amendment Section	Street Address:
	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
1 ananassec, 1 D 223 17	Tallahassee, FL 32303

CR2E045 (04/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Surganized under the laws of the State of Floregistered agent, or both, in the State of Floregistered agent, or both, in the State of Floregistered	orida	
1. The name of t	he corporation: Lil Scholars Learning	g Academy Inc		
	office address: 3520 NW 13th Street			
3. The mailing a	ddress (if different): PO Box 744, Ha	wthome, FL 32640		
4. Date of incorp	poration/qualification: 01/10/2012	Document number: N12000000	296	
	I street address of the current registe tment of State: (If resigned, enter re-	red agent and registered office on file with signed)	the	
	James G Franklin Sr			
	3520 NW 13th Street			
	Gaineville FL 32609			
6. The name and (if changed):	I street address of the new registered	agent (if changed) and /or registered office	2023 JUN 15	
	J & S Accounting and Tax		<u>.</u> 5	
	6315 SE US Highway 301	 जि. जि.	PH 12:	
		O. Box NOT acceptable	KI S <b>S</b> : S	<u> </u>
	Hawthorne FL 32640		H 12	
The street address changed will	ess of its registered office and the st be identical.	reet address of the business office of its	registered	agent,
Such change wa authorized by th	as authorized by resolution duly add the board, or the corporation has bee	opted by its board of directors or by an or in notified in writing of the change.	fficer so	
1 Defects	11111	Sybrenda G Johnson, President		
	re of an officer of director	Printed or typed name and title		
I further agree t of my duties, an document is bei	the appointment as registered ager o comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change been notified in writing of this cha	statutes relative to the proper and comp obligation of my position as registered in in the registered office address. I hereby	lete perfor agent. Or confirm th	rmance if this hat the
		05/26/2023		
Sign	nature of Registered Agent	Date		
If signing on be	half of an entity:			
	nead, Secretary / Treasurer			
T	yped or Printed Name			

\* \* \* FILING FEE: \$35.00 \* \* \*