N/2000002/90

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
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Amend

MAR 1 3 2012

T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Tiny Tyke	s Non Profi	t Corporation
DOCUMENT NUMBER: N12000002	190	
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Eva B. Miranda		
	(Name of Contact Persor)
Tiny Tykes Non Profit Co	orporation	
	(Firm/ Company)	
29295 SW 187 Court		
	(Address)	
Homestead, Florida. 330	30	
	(City/ State and Zip Code	e)
tinytykes@bellsou		
E-mail address: (to be used	for future annual report i	notification)
For further information concerning this matter, please	call:	
Eva Miranda	_{at (} 786	251-2299 de & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:
\$35 Filing Fee \$\times \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED 12 MAR 12 PM 12: 53

PORATION	TARRES	是自己的
iled with the Florida Dept. of	(State)	गुरूवर्डी है।
umber of Corporation (if know	/n)	<u> </u>
6, Florida Statutes, this <i>Florid</i> :	a Not For Profit Corporation adopt	s the followin
of the corporation:		
		The ne
	orporated" or the abbreviation "Con	rp." or "Inc."
<u>EET ADDRESS</u>)		
<u>le:</u>		
FICE BOX		
		_ _
r registered office address in	Clarida anton the name of the	
gistered office address:	rioriua, enter the name of the	
(Florida street ad	ddress)	
•	Ti!.i.	
(City)	, Florida (Zip Code)	
ning Degistered Agents		
	d accept the obligations of the posite	ion.
•		
	umber of Corporation (if known 6, Florida Statutes, this Florida 5: of the corporation: e word "corporation" or "income aname. pplicable: EET ADDRESS) le: FICE BOX) registered office address in gistered office address: (Florida street address:	umber of Corporation (if known) 6, Florida Statutes, this Florida Not For Profit Corporation adopt of the corporation: e word "corporation" or "incorporated" or the abbreviation "Contename. poplicable: ET ADDRESS) registered office address in Florida, enter the name of the gistered office address: (Florida street address) (Florida street address) , Florida (City) (Zip Code)

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, nam	ie, and
address of each Officer and/or Director being added:	,

(Attach additional sheets. if necessary)

Please note the officer/director title by the first letter of the office title:

 $P = President; V = Vice President; T \approx Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO \approx Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>v</u>	ERNESTO CORDERO	29295 SW 187 COURT HOMESTEAD, FLORIDA, 33030
2) Change Add Remove	s	ERNESTO RAUL CORDERO	29295 SW 187 COURT HOMESTEAD, FLORIDA,33030
3) Change Add Remove	<u>c</u>	YAIMELYS GOVIN	29295 SW 187 COURT HOMESTEAD, FLORIDA, 33030
4) Change Add Remove			
5) Change Add Remove		_	
6) Change Add Remove		<u> </u>	

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)					
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The	e date of each amendment(s) adoption: 03/07/20/2
Effe	ective date <u>if applicable</u> :
	(no more than 90 days after amendment file date)
Ada	option of Amendment(s) (CHECK ONE)
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Dated 03/07/2012 Signature Cesses = -
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Eva b. Miranda
	(Typed or printed name of person signing)
	President
	(Title of person signing)