

N150000003510

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000283651040

03/25/16--01019--005 ~~\*\*\*~~

53.50

Name Change  
& Amend

FILED  
16 APR 20 PM 2:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

X00789, 104135, 00524, 00671



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 1, 2016

Nicolas Resto  
3056 Broadway  
Ft. Myers, FL 33901

SUBJECT: THE COMMUNITY KIDS OF SWFL INC.  
Ref. Number: N15000003510

We have received your document for THE COMMUNITY KIDS OF SWFL INC. and your check(s) totaling \$53.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please include just the article that you are amending (on page 3 section E). Do not attach the entire articles of incorporation.

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) 245-6050.

Annette Ramsey  
Regulatory Specialist II

Letter Number: 116A00006720

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** THE COMMUNITY KIDS OF SWFL. INC

**DOCUMENT NUMBER:** N15000003510

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nicolas Resto

(Name of Contact Person)

(Firm/ Company)

3056 Broadway

(Address)

Fort Myers FLorida 33901

(City/ State and Zip Code)

Communitykidsofswfl@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nicolas Resto

(Name of Contact Person)

at ( 239 ) 645-8932

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$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

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

**THE COMMUNITY KIDS OF SWFL INC**

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

(Document Number of Corporation (if known))

FILED

16 APR 20 PM 2:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 the corporation:**

**COMMUNITY KIDS OF SWFL INC**

*The new*

*name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**

**N/A**

*(Principal office address MUST BE A STREET ADDRESS)*

**C. Enter new mailing address, if applicable:**

**N/A**

*(Mailing address MAY BE A POST OFFICE BOX)*

**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:

**N/A**

*(Florida street address)*

New Registered Office Address:

*(City)*

*Florida*

*(Zip Code)*

**New Registered Agent's Signature, If changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

**N/A**

*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)

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

P - President; V - Vice President; T - Treasurer; S - Secretary; D - Director; TR - Trustee; C - Chairman or Clerk; CEO - Chief Executive Officer; CFO - 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>BM</u>	<u>Matilde Resto</u>	<u>3056 Broadway</u>
<input type="checkbox"/> Add			<u>Fort Myers Fl 33901</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>BM</u>	<u>Luis Resto</u>	<u>3056 Broadway</u>
<input type="checkbox"/> Add			<u>Fort Myers Fl 33901</u>
<input checked="" type="checkbox"/> Remove			
3) <input checked="" type="checkbox"/> Change	<u>Sec.</u>	<u>Teresa Resto</u>	<u>3056 Broadway</u>
<input type="checkbox"/> Add			<u>Fort Myers Fl 33901</u>
<input type="checkbox"/> Remove			
4) <input checked="" type="checkbox"/> Change	<u>P</u>	<u>Rudolph Rosso</u>	<u>3056 Broadway</u>
<input type="checkbox"/> Add			<u>Fort Myers Fl 33901</u>
<input type="checkbox"/> Remove			
5) <input checked="" type="checkbox"/> Change	<u>VP</u>	<u>Madelyn Vargas</u>	<u>3056 Broadway</u>
<input type="checkbox"/> Add			<u>Fort Myers Fl 33901</u>
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change	<u>T</u>	<u>Jorge Resto</u>	<u>3056 Broadway</u>
<input checked="" type="checkbox"/> Add			<u>Fort Myers Fl 33901</u>
<input type="checkbox"/> Remove			
7) <input type="checkbox"/> Change	<u>BM</u>	<u>Odalis fernandez</u>	<u>3056 Broadway</u>
<input checked="" type="checkbox"/> Add			<u>Fort Myers Fl 33901</u>
<input type="checkbox"/> Remove			

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no text or other markings on the paper.

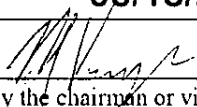
The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Adoption 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 03/18/2016

Signature   
(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)

Madelyn Vargas  
(Typed or printed name of person signing)

**VP**  
(Title of person signing)