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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CS CHILDCARE SERVICES INC

DOCUMENT NUMBER: N19000001305

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

Please return all correspondence concerning this matter to the following:

Ardonnis Lumpkin

(Name of Contact Person)

N/A

(Firm/ Company)

14043 SW 53rd Street

(Address)

Miramar, FL 33027

(City/ State and Zip Code)

ardonnislumpkin@gmail.com

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

For further information concerning this matter, please call:

Ardonnis Lumpkin

(954)

445-0692

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

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

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Ardonnis Lumpkin, Ed. S

14043 SW 53rd Street
Miramar, FL 33027
Phone# (954) 445-0692
Fax# (954) 251-4700
Ardonnislumpkin@gmail.com

12/09/2020

Florida Department of State, Division of Corporations
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To whom it may concern,

I recently received a call from a member of the Department of Revenue regarding some unpaid payroll taxes for the following corporation: Creative Solutions Childcare Services, Inc. N20000002976

This is the second time I am being asked about this childcare company that I have no legal affiliation with and I wish to have my name permanently removed from it once and for all.

An additional search of the Florida Department of State Website (www.sunbiz.org) reveals my name is also listed as a Director on two more childcare corporations that it shouldn't be which are both connected to the one above in question; the two companies are as follows:

Creative Solution Childcare Services, Inc. N13000005641
CS Childcare Services Inc. N19000001305

Please be advised that I am not and should not have ever been legally affiliated with any of the aforementioned entities. My name was added to the above corporations outside my knowledge. I have never been to any of these businesses; I have never sat in on any business meetings for any of these corporations, I have not reviewed any business related documents for any these corporations nor do I have any knowledge of any business operations of any of them.

I was asked some years ago if my name could be listed amongst others as an Advisory Board representative to one of them to which I said yes, but I never consented to it being added to any corporate body of any the above corporations.

I would like you to please update your records to reflect my non-involvement.

If someone from your office could call me at (954) 445-0692 to confirm receipt of this correspondence and provide me with confirmation of the resolution of this matter I would greatly appreciate it...Thanks!

Sincerely,



Ardonnis Lumpkin Ed.S,

Articles of Amendment
to
Articles of Incorporation
of

CS CHILDCARE SERVICES INC

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

N19000001305

(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 the corporation:

N/A

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

N/A

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

N/A

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

New Registered Office Address:

(Florida street 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.

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 checked="" 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 <input type="checkbox"/> Add	<u>D</u>	<u>Ardonnis Lumpkin</u>	<u>13181 SW 45th Drive</u> <u>Miramar, FL 33027</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change <input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

N/A

N/A

The date of each amendment(s) adoption: 2/06/2019, if other than the date this document was signed.

Effective date if applicable: 2/06/2019
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

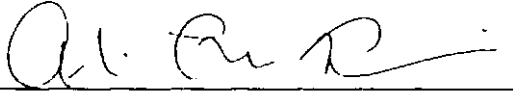
Adoption of Amendment(s) (CHECK ONE)

- ☐ 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 12/09/2020

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)

Ardonnis Lumpkin

(Typed or printed name of person signing)

Director

(Title of person signing)