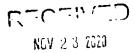
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ciation for Child Care Management, Inc.
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are s	
Please return all correspondence concerning this m	natter to the following:
Jennifer Shields	
	(Name of Contact Person)
The Florida Association for Child Care Manageme	ent, Inc.
· · · · · · · · · · · · · · · · · · ·	(Firm/ Company)
4840 Dairy Rd. Suite 101	
,	(Address)
Melbourne, FL 32904	
	(City/ State and Zip Code)
jshields@facem.org	
E-mail address: (to be u	ised for future annual report notification)
For further information concerning this matter, ple	ease call:
Jennifer Shields	321 848-1596 at
(Name of Contact Per	
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	& \$\subseteq\$\$\$ \$\subseteq\$\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$
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

Articles of Amendment to Articles of Incorporation of

The Florida Association for Child Care Management, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N26617 (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: 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 <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (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: (Florida street address) New Registered Office Address: . Florida _ (City) (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: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	ones	
Type of Action (Check One)	Title	Name	Address
l) Change * Add	OD	Selena McNeely	4840 Dairy Rd. Suite 101 Melbourne, FL 32904
Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
Remove			
F. <u>If amending or additional shee</u>		icles, enter change(s) here: (Be specific)	
	-		
	•	, , , , , , , , , , , , , , , , , , , ,	

The date of each amendment(s) adoption:, if other than t
date this document was signed.
Difference date if annihable.
Effective date if applicable: (no more than 90 days after amendment file date)
(no more than 90 days after amenament 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 east for the amendment(s)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

Dated	11/17/2020
Duted	
Signature	
	(By the chairman or vice chairman of the board, president or other officer-if director
	have not been selected, by an incorporator - if in the hands of a receiver, trustee, or
	(other court appointed fiduciary by that fiduciary)
	t other court appointed fiduciary by that fiduciary)
	cother court appointed fiduciary by that fiduciary) Jennifer Shields
	Jennifer Shields
	Jennifer Shields
	Jennifer Shields (Typed or printed name of person signing)
	Jennifer Shields

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were