2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000063859

Entity Name: TLC QUALITY CHILD CARE, INC.

FILED May 16, 2008 Secretary of State

10125 SUNSET STRIP SUNRISE, FL 33322

Current Mailing Address: New Mailing Address:

10125 SUNSET STRIP SUNRISE, FL 33322

FEI Number: 20-2794124 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 HARTMAN, RICHARD R PRES
 HARTMAN, DORA

 10131 NW 25TH CT
 10131 NW 25TH CT

 SUNRISE, FL 33322
 US

 SUNRISE, FL 33322
 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DORA HARTMAN 05/16/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: HARTMAN, RICHARD R Name: HARTMAN, DORA

 Address:
 10131 NW 25TH CT
 Address:
 10131 NW 25TH CT

 City-St-Zip:
 SUNRISE, FL 33322
 City-St-Zip:
 SUNRISE, FL 33322

Title: TRES () Delete Title: TRES (X) Change () Addition

 Name:
 HARTMAN, TAMARA
 Name:
 HARTMAN, RICHARD

 Address:
 10131 NW 25TH CT
 Address:
 10131 NW 25TH CT

 City-St-Zip:
 SUNRISE, FL 33322
 City-St-Zip:
 SUNRISE, FL 33322

Title: () Delete Title: SEC () Change (X) Addition

 Name:
 Name:
 HARTMAN, TAMARA

 Address:
 Address:
 10131 NW 25TH CT

 City-St-Zip:
 City-St-Zip:
 SUNRISE, FL 33322

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DORA HARTMAN P 05/16/2008