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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: The Ch	ildneus First Per	school Iv.		
DOCUMENT NUMBER: POACOO	115118			
The enclosed Articles of Amendment and fee a	are submitted for filing.			
Please return all correspondence concerning th	is matter to the following:			
<u>Gerava</u>	Sumarco of Contact Person)			
The Children's Fix	Company)	Tio.		
10870 GW 113	Dace (Address)			
Miami, A- 3317	State and Zip Code)			
For further information concerning this matter, please call:				
Gevord Samovoo (Name of Contact Person)	(Area Code & Daytime	•		
Enclosed is a check for the following amount r				
\$35 Filing Fee \$\times \text{S43.75 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 C	ircle		

Tallahassee, FL 32301

**Articles of Amendment Articles of Incorporation** (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) 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 Name of New Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

New Registered Office Address:

(Florida street address)

(City)

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)

<u>Title</u>	Name C	<u>Address</u>	Type of Action
<u>P</u>	Mavreen Samaroo	108705W 113 Place MIRMI, H. 33176	Add Remove
<u>vP</u>	Gerard Samara	10870 Gw 113 Place Mirmi, Fl. 35176	Add Remove
			Add Remove
	ding or adding additional Articles, enter dditional sheets, if necessary). (Be specif		
provisi	mendment provides for an exchange, recloss for implementing the amendment if a not applicable, indicate N/A)		

The date of each amendment(s) adoption: 10/23/08
Effective date if applicable: 10 76 08
(no more than 90 days after amen iment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by Maureen Samaly 00
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated
Signature (By a director, president or other officer – if directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
*A
Viaurem Samoevop
(Typed or printed name of person signing)
Vresident
(Title of person signing)