108000010783

| (Requestor's Name) |
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| |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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04/06/09--01032--011 **35.00

COVER LETTER

TO: Amendment Section **Division of Corporations**

| NAME OF CORPORATION: Tiny Treasures Day Care Center Inc. | | | | |
|--|--|--|--|--|
| DOCUMENT N | J MBER: <u>P08000010783</u> | | | |
| The enclosed Arti | cles of Amendment and fee a | re submitted for filing. | | |
| Please return all c | orrespondence concerning thi | is matter to the following: | | |
| | the state of the s | Rose Cabrera | | |
| | (Name | of Contact Person) | | |
| nd or delated of the | | asures Day Care Center Inc | | |
| | (Fii | rm/ Company) | | |
| | | 543 E 9 St | · | |
| | | (Address) | • | |
| | | aleah Fl. 33010 tate and Zip Code) | | |
| For further inform | ation concerning this matter, | | | |
| Rose Cabrera | | at (305) 381-574 | | |
| · | e of Contact Person) | (Area Code & Daytim | • | |
| Enclosed is a chec | k for the following amount m | nade payable to the Florida De | partment of State: | |
| ¥35 Filing Fee | \$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| P.O. Box 6 | nt Section f Corporations | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C | | |

Tallahassee, FL 32301

Articles of Amendment SECRETARY OF STATE to DIVISION OF CORPORATIONS Articles of Incorporation of O9 APR -6 PM 2: 28

| | res Day Care Center, Increasely filed with the Florida D | |
|---|--|--|
| | P08000010783 | |
| (Document N | umber of Corporation (if known) | |
| Pursuant to the provisions of section 607.1 following amendment(s) to its Articles of Inc. | | da Profit Corporation adopts the |
| A. If amending name, enter the new name | of the corporation: | |
| N/A | | |
| The new name must be distinguishable "incorporated" or the abbreviation "Corp. "Co". A professional corporation no association," or the abbreviation "P.A." | ," "Inc.," or Co.," or the desi | ignation "Corp," "Inc," or |
| B. Enter new principal office address, if a (Principal office address MUST BE A STR.) | | |
| | | |
| | 91-74- <u></u> | 4-1-2-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- |
| C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF) | | |
| (Albaning address <u>Maril 1937-11-051-01-</u> | | |
| | Annual State of Annual and Annual | |
| | | |
| D. If amending the registered agent and/o | | orida, enter the name of the |
| new registered agent and/or the new re | gistered office address: | |
| Name of New Registered Agent: | N/A | |
| New Registered Office Address: | (Florida street addr | acc) |
| New Registered Office Address. | (Montau street daar) | |
| | (City) | , Florida (Zip Code) |
| | • | (<i>24</i>) |
| New Registered Agent's Signature, if chan I hereby accept the appointment as register position. | | and accept the obligations of the |
| _ | | |
| | Signature of New Registered Ag | ent, 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)

| Title | <u>Name</u> | Address | Type of Action |
|-------------|---|--|-------------------|
| Officer | Jeffrey De La Cruz | 16814 NW 70th Avenue Hialeah, Fl. 33015 | □ Add □ Remove |
| | · | | Add Remove |
| | | | |
| | ding or adding additional Articles additional sheets, if necessary). (B | | |
| | | | |
| | | | |
| provisi | | ge, reclassification, or cancellation on the amendment of | |
| N/A | | | |
| | , | | |
| | | | |
| | | | |
| | | | |

| The date of each amendmen | t(s) adoption: 03/30/2009 |
|--|---|
| Effective date if applicable: | 03/30/2009 |
| | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| | ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval. |
| | ere approved by the shareholders through voting groups. The following statement ed 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 | 92 |
| <u> </u> | (voting group) |
| The amendment(s) was/we action was not required. | ere adopted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/we action was not required. | ere adopted by the incorporators without shareholder action and shareholder |
| Dated 03/30 | 0/2009 |
| Signature | |
| sele | y a director, president or other officer — if directors or officers have not been ected, by an incorporator — if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) |
| | Rose Cabrera |
| | (Typed or printed name of person signing) |
| | President |
| | (Title of person signing) |