## 108000018580

(Requestor's Name)	•••
(Address)	
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(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	/AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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11/05/08--01014--022 \*\*43.75

Anual







November 10, 2008

RAMONA MONTEMAYOR A BABY GUARD SERVICE OF CENTRAL FLORIDA 3564 AVALON PARK BLVD E STE 1 #233 ORLANDO, FL 32828

SUBJECT: A BABY GUARD SERVICE OF CENTRAL FL INC.

Ref. Number: P08000018580

We have received your document for A BABY GUARD SERVICE OF CENTRAL FL INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The first page of the amendment form is missing. Please complete the entire amendment form and resubmit for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Letter Number: 608A00056736

Tina Roberts Regulatory Specialist II

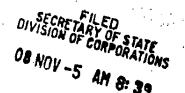
Division of Cornerations - P.O. ROY 6327 - Tallahassee Florida 32314

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: A Baby C	Guard Service Of Central	Florida, Inc
DOCUMENT NUMBER: P0800001	8580	I
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning to	his matter to the following:	
	amona Montemayor e of Contact Person)	<del></del>
	Service Of Central Florid	la, Inc 🙃
3564 Avalor	Park Blv. E. ste 1 #233 (Address)	
	Orlando,Fl 32828 State and Zip Code) r, please call:	
Ramona Montemayor (Name of Contact Person)	at ( 407 ) 568-1899 (Area Code & Daytime	
Enclosed is a check for the following amount	made payable to the Florida Dep	partment of State:
\$35 Filing Fee \$43.75 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 Ci Tallahassee, FL 32301	ircle

## Articles of Amendment to Articles of Incorporation of



(Name of Corporation as cu		he Florida Dept. of St	<u>ite</u> )
	08000018580 Tumber of Corporation	on (if known)	<b>G</b>
Pursuant to the provisions of section 607.1 following amendment(s) to its Articles of Inc.		es, this <i>Florida Profit</i>	Corporation adopts the
A. If amending name, enter the new name	of the corporation	<u>:</u>	
The new name must be distinguishable "incorporated" or the abbreviation "Corp. "Co". A professional corporation na association," or the abbreviation "P.A."	," "Inc.," or Co.,	" or the designation '	'Corp," "Inc," or
B. Enter new principal office address, if a (Principal office address MUST BE A STRE			
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OF)			
D. If amending the registered agent and/o new registered agent and/or the new re			er the name of the
Name of New Registered Agent:			<del></del>
New Registered Office Address:	(Floria	la street address)	_
	<u>O</u>	(City)	_, Florida (Zip Code)
New Registered Agent's Signature, if change I hereby accept the appointment as register position.			ot the obligations of the
	- A31	Registered Agent if cha	

## 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 ·	Address	Type of Action
ST	JONATHAN DEDO	844 GUY ROAD ORLANDO FL 32828	Add Remove
			Add Remove
			Add Remove
(attach addii	tional sheets, if necessary). (Be specifi	ic)	· · · · · · · · · · · · · · · · · · ·
-			
provisions	ndment provides for an exchange, recl for implementing the amendment if n applicable, indicate N/A)		
If any shares w	vere distributed , please cancelfor the p	payments for shares were never pa	id for. max:20
	as suppose to be assignedbut this cor	porate office never offcially asigne	d or recieved mone
for said shares	•		

Th	e date of each amendmen	t(s) adoption: 11/05/2008
Efi	fective date <u>if applicable</u> :	11/05/2008
		(no more than 90 days after amendment file date)
Ad	loption of Amendment(s)	(CHECK ONE)
☑		are adopted by the shareholders. The number of votes cast for the amendment(s) ere 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 Alejandro Montem	ayor,Ramona Montemayor, Jonathan Dedr
	•	(voting group)
	The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
<b>a</b>	The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
	Dated_11/0	5/2008
	Signature	Ramona Montimayor
	(By	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)
		Ramona Montemayor
		(Typed or printed name of person signing)
		VP
		(Title of person signing)