

P08000049438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

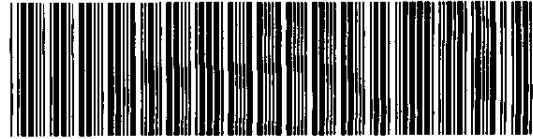
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

called Samantha Thomas 6/2
gave permission to
delete FIC NAME &
ADD Pres. Title

Office Use Only



700207566007

05/16/11--01038--019 **35.00

FILED
11 MAY 31 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMEND
CRG
6/2

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Happy Care Bear Inc.

Name of Corporation

DOCUMENT NUMBER: P08000049438

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Samantha Thomas

Name of Contact Person

Happy Care Bear

Inc.
Firm/Company

6265 Merrill Road

Address

Jacksonville, Florida 32211

City/State and Zip Code

Vickorie1@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Samantha Thomas

Name of Contact Person

at (904) 554-9211

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certificate of Status

☐ \$43.75 Filing Fee & Certified Copy

☐ \$52.50 Filing Fee, Certificate of Status &
Certified Copy

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 Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 24, 2011

SAMANTHA THOMAS
HAPPY CARE BEAR INC
6265 MERRILL ROAD
JACKSONVILLE, FL 32211

SUBJECT: HAPPY CARE BEAR INC
Ref. Number: P08000049438

We have received your document for HAPPY CARE BEAR INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 911A00012812

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Happy Care Bear DBA Kidz World Academy

DOCUMENT NUMBER: PO8000049438

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Samantha Thomas
Name of Contact Person

Happy Care Bear
Firm/ Company

6265 Merrill Road
Address

Jacksonville, FL 32277
City/ State and Zip Code

Kidzworlddaycare@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Samantha Thomas at (904) 683-9020
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

RECEIVED

AM 9:00
DIVISION OF STATE
TALLAHASSEE, FLORIDA

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 Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Happy Core Bear Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P08000049438

(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:

Happy Core Bear Inc.

^{2 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)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

Samantha Thomas

New Registered Office Address:

6265 Merrill Road

(Florida street address)

Jacksonville, Florida 32277

(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.

Samantha Thomas

Signature of New Registered Agent, if changing

FILED
11 MAY 31 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
owner	Juliet Gardner	6265 Merrill Rd Jax, FL 32277	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
owner/ office Manager	Samantha Thomas	6265 Merrill Rd Jax, FL 32277	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Removing Juliet Gardner and Adding Samantha Thomas
Same address & Phone number, Just chang of
officers.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: 5-8-2011
(date of adoption is required)
Effective date if applicable: 5-8-2011
(no more than 90 days after amendment 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 _____.”
(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 5-8-2011

Signature Samantha Thomas
(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)

Samantha Thomas
(Typed or printed name of person signing)

Owner/Office Manager/President/Director
(Title of person signing)