

PD8000099191

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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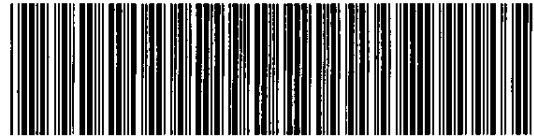
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 AUG -9 PM 12:38

Amend  
@ 8/10/11

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** OUR CREATIVE KIDS INC

**DOCUMENT NUMBER:** 908000099191

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

Please return all correspondence concerning this matter to the following:

CHRISTINA CAPITINI

Name of Contact Person

OUR CREATIVE KIDS INC

Firm/ Company

8903 GLADES ROAD or 1500 Siena Lane

Address

BOCA RATON, FL 33434 or Boynton Beach FL 33436

City/ State and Zip Code

KIDSKONNECTION@AOL.COM

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

For further information concerning this matter, please call:

CHRISTINA CAPITINI

Name of Contact Person

at ( 561 )

4839799

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)

**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

OUR CREATIVE KIDS, INC

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

(Document Number of Corporation (if known))

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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 new registered agent and/or the new registered office address:**

Name of New Registered Agent:

KATHERINE CAPITINI

New Registered Office Address:

(Florida street address)

(City)

\_\_\_\_\_, Florida  
(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.*

*Katherine Capitini*  
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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
PRESIDENT	CHRISTINA CAPITINI	8903 GALDES ROAD BOCA RATON, FL 33434	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
PRESIDENT	KATHERINE CAPITINI	8903 GLADES ROAD BOCA RATON, FL 33434	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
VICE PRESIDENT	CHRISTINA CAPITINI	8903 GLADES ROAD BOCA RATON, FL 33434	<input checked="" 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)*

**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)*

I CHRISTINA CAPITIN, AM DISOLVING MYSELF AS PRESIDENT AND REDUCING  
 MY SHARE HOLDER PERCENTAGE OF OUR CREATIVE KIDS, DBA, KIDS  
 KONNECTION TO 10% My title now is vice-President

*Christina Capiti*

The date of each amendment(s) adoption: 08/03/11

(date of adoption is required)

Effective date if applicable: 08/03/11

(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 08/03/11

Signature

Christina Capitini  
(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)

Christina Capitini  
(Typed or printed name of person signing)

Vice-President  
(Title of person signing)