

PI0000052660

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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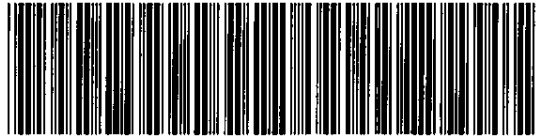
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL 32310

NC
Tewers
12-13-10

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: A TADPOLE & TOADS ON LONE STAR ROAD INC.

DOCUMENT NUMBER: P10000052660

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

Please return all correspondence concerning this matter to the following:

MS. CAROLYN BALL-PRIDE

Name of Contact Person

TADPOLES & TOADS CHILCARE LEARNING CENTER

Firm/ Company

6802 LILLIAN ROAD

Address

JACKSONVILLE, FLORIDA 32211

City/ State and Zip Code

BALLPRIDE@AOL.COM

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

For further information concerning this matter, please call:

MS. CAROLYN BALL-PRIDE

Name of Contact Person

at (904)

721-5941

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

***Tadpoles & Toads Childcare Learning
6902 Lillian Road
Jacksonville, Florida 32211***

December 05, 2010

**To: Ms. Thelma Lewis
Document Specialist Supervisor**

**From: Carolyn Ball-Pride
Tadpoles & Toads Childcare Learning Center
Jacksonville, Florida 32211**

Re: Name Change

We spoke earlier this morning regarding a fax being forward to the Health/Food Program to the Attention of Ms. Millie Schroeder by Thursday @ 850-414-1622. Our center needs this in order to continue with the food program for the upcoming year. If you have any questions regarding this matter please call me back @ 904-721-5941 or email me at ballpride@aol.com.

Sincere thanks in advance

Carolyn Ball-Pride



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 30, 2010

MS. CAROLYN BALL-PRIDE
A TADPOLE & TOADS ON LONE STAR ROAD INC.
6802 LILLIAN ROAD
JACKSONVILLE, FL 32211

SUBJECT: A TADPOLE & TOADS ON LONE STAR ROAD INC.
Ref. Number: P10000052660

We have received your document for A TADPOLE & TOADS ON LONE STAR ROAD INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The date of adoption of each amendment must be included in the document.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 910A00027717

fax

850 414-1622

ATTN M

Schroeder

Articles of Amendment
to
Articles of Incorporation
of

A TADPOLES & TOADS ON LINE STAR ROAD INC.

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

P0000052660

(Document Number of Corporation (if known))

FILED

2010 DEC -10 A 9:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

LONE STAR LEARNING CENTER, Inc.

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)

8142 LONE STAR ROAD

JACKSONVILLE, FLORIDA

32211

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME AS ABOVE

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:

ROWLAND V. WILLIAMS- (same)

New Registered Office Address:

6411 ARLINGTON ROAD

(Florida street address)

JACKSONVILLE

(City)

, Florida 32211

(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.

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>
			<input 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)

N/A

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: n/a

(date of adoption is required)

Effective date if applicable:

(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 November 15, 2010

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)

CAROLYN BALL - PRIDE

(Typed or printed name of person signing)

CEOP

(Title of person signing)