

PI0000058153

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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☐

MAIL

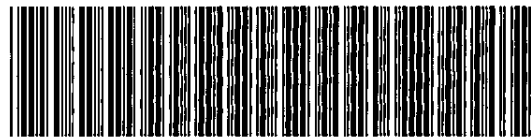
(Business Entity Name)

(Document Number)

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11/02/10--01006--016 **35.00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
10 NOV 16 PM 3:27

Amend
@ 11/16/10

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CHILD CARE MANAGEMENT OF PALM COAST CC

DOCUMENT NUMBER: P10000058153

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

Please return all correspondence concerning this matter to the following:

KAPINGA KABAMBA

Name of Contact Person

CHILD CARE MANAGEMENT OF PALM COAST CORP

Firm/ Company

88 LEE DRIVE

Address

PALM COAST, FL 32137

City/ State and Zip Code

GINAKABADI@YAHOO.COM

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

For further information concerning this matter, please call:

KAPINGA KABAMBA

Name of Contact Person

at (386)

338-8044

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 3, 2010

KAPINGA KABAMBA
CHILD CARE MANAGEMENT OF PALM COAST CORP
88 LEE DRIVE
PALM COAST, FL 32137

SUBJECT: CHILD CARE MANAGEMENT OF PALM COAST CORP
Ref. Number: P10000058153

We have received your document for CHILD CARE MANAGEMENT OF PALM COAST CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 310A00025902

RECEIVED
10 NOV 16 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

CHILD CARE MANAGEMENT OF PALM COAST CORP

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

P10000058153

(Document Number of Corporation (if known))

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
10 NOV 16 PM 3:27

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:

KAPINGA KABAMBA

New Registered Office Address:

88 LEE DRIVE

(Florida street address)

PALM COAST

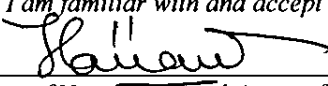
(City)

Florida 32137

(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>
P	KATHE MESETE	141 LONDON DRIVE PALM COAST, FL 32137	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
VP	KIMBERLY ROTUNNO	47 FLAMINGO DRIVE PALM COAST, FL 32137	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
P	KAPINGA KABAMBA	88 LEE DRIVE PALM COAST, FL 32137	<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)

KATHE MESETE AND KIMBERLY ROTUNNO HEREBY TRANSFER
ALL SHARES OF CHILD CARE MANAGEMENT OF PALM COAST CORP TO
KAPINGA KABAMBA. KATHE MESETE AND KIMBERLY ROTUNNO RETAIN
NO OWNERSHIP NOR HOLD ANY OFFICE ON THE BOARD OF
DIRECTORS OF CHILD CARE MANAGEMENT OF PALM COAST CORP.

The date of each amendment(s) adoption: 10/27/2010

(date of adoption is required)

Effective date if applicable: 11/1/2010

(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.

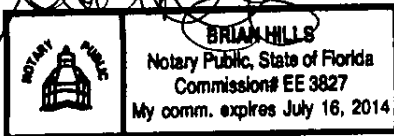
Dated 10/27/10

Signature Kimberly Botunno Kathe Mesete

(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)

Kimberly Botunno Kathe Mesete
(Typed or printed name of person signing)

(Title of person signing)



Witness of 3 signatures above
at October 27, 10