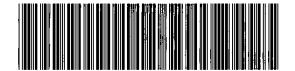
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SECRETARY OF STATE
ALLAHASSEE, FINAIE

Amend Brown 7-12-11

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: Happy Fee	et Home Daycare and I	_earning Center Inc
DOCUMENT NU	JMBER:	P100000680	056
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.	
Please return all co	orrespondence concerning the	is matter to the following:	
	HE	CTOR D ABRAHAM	
	N	iame of Contact Person	
	TAX & ACC	OUNTING SOLUTION LL	С
		Firm/ Company	
	5448 HC	FFNER AVE SUITE 108	· · · · · · · · · · · · · · · · · · ·
		Address	
		NDO, FLORIDA 32812	
		ity/ State and Zip Code	
	HABRAHA E-mail address: (to be use	M5@YAHOO.COM d for future annual report notificati	on)
For further inform	ation concerning this matter,	please call:	
HEC	TOR D ABRAHAM	at (407)	277-8668
Name	of Contact Person		e Telephone Number
Enclosed is a chec	k for the following amount m	ade payable to the Florida D	epartment of State:
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclos	S52.50 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 Corporation Clifton Building 2661 Executive Center O	

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

Happy Feet Home Daycare and Learning Center, Inc. (Name of Corporation as currently filed with the Florida Dept. of State)

P10000068056

	Articles of Amendment	☆ .
	to	enter, Inc Dept. of State Oct. (1) Dept. of State
	Articles of Incorporation of	Ju My
	VI	TAJECD 11
Happy Feet Home Da	aycare and Learning C	enter Inc
(Name of Corporation as cur	rrently filed with the Florida I	Dept. of State
P1	0000068056	706
(Document No	umber of Corporation (if known	7.
Pursuant to the provisions of section 607.10 mendment(s) to its Articles of Incorporation		ida Profit Corporation adopts the fol
A. If amending name, enter the new name	of the corporation:	
		The new
abbreviation "Corp.," "Inc.," or Co.," or ti name must contain the word "chartered," "p.		
3. Enter new principal office address, if apprincipal office address MUST BE A STRE	<u></u> <u>le:</u>	
B. Enter new principal office address, if applicable (Mailing address). Enter new mailing address, if applicable (Mailing address).	le:	
B. Enter new principal office address, if applicabe (Mailing address MAY BE A POST OFF	le: FICE BOX) r registered office address in F	lorida, enter the name of the
Enter new principal office address, if apprincipal office address MUST BE A STRE Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF) If amending the registered agent and/or new registered agent and/or the new registered agent and	le: FICE BOX) r registered office address in F	lorida, enter the name of the
3. Enter new principal office address, if apprincipal office address MUST BE A STRE 2. Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF) 3. If amending the registered agent and/or	le: FICE BOX) r registered office address in F	lorida, enter the name of the
B. Enter new principal office address, if apprincipal office address MUST BE A STRE C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF) D. If amending the registered agent and/or new registered agent and/or the new registered Agent:	le: FICE BOX) r registered office address in Figistered office address:	
B. Enter new principal office address, if apprincipal office address MUST BE A STRE C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF) D. If amending the registered agent and/or new registered agent and/or the new registered	le: FICE BOX) r registered office address in F	
B. Enter new principal office address, if apprincipal office address MUST BE A STRE C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF) D. If amending the registered agent and/or new registered agent and/or the new registered Agent:	le: FICE BOX) r registered office address in Figistered office address:	

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>	Address	Type of Action
CEO	OLIVARES, BASILISIA C	723 LAKE BISCAYNE WAY ORLANDO, FL 32824	☐ Add ☑ Remove
CEO_	MARRERO, YARITZA	9940 SHADOW CREEK DRIVE ORLANDO, FL 32832	☐ Add ☑ Remove
CEO	SANTELISES, MADELINE	3823 MILLENIA BLVD APT 209 ORLANDO, FL 32839	☐ Add ☑ Remove
	ng or adding additional Articles, ente itional sheets, if necessary). (Be spec		
provision	endment provides for an exchange, reas for implementing the amendment in applicable, indicate N/A)		

The date of each amendment	(s) adoption: 1-5-2011
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/weby the shareholders was/web	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statement d 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	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
V 1	(voting group)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated_JUL\	(5, 2011 Dr. A Orba
(By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	CARMEN L RIOS
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)