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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Little Superheroes Learning Center and ChildCare, Inc. DOCUMENT NUMBER: P11000053022 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Zoila V. Gomez Name of Contact Person Little Superheroes Learning Center and ChildCare, Inc. Firm/ Company 14791 SW 184 Street Address Miami FL 33187 City/ State and Zip Code zgomez l 1@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (____305___) 343-5822

Area Code & Daytime Telephone Number Zoila Gomez Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee □ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

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Little Superheroes Learning Center and ChildCare, Inc.

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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	mber of Corporation (if	 	The Control of the Co
Pursuant to the provisions of section 607,1006, Florida Statute is Articles of Incorporation:	·		wing amendment(s
A. If amending name, enter the new name of the corporat	tion:		
			The new
name must he distinguishable and contain the word "corporati "Inc" or Co.," or the designation "Corp," "Inc," or "C "chartered," "professional association," or the abbreviation	Zo". A professional c	ncorporated" or the abbrevi orporation name must con	ation "Corp.," utain the word
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)		_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a	ce address in Florida, address:	enter the name of the	
Name of New Registered Agent			<u></u>
(Fle	orida street address)		
New Registered Office Address:		. Florida	
New Registered Office Address.	(City)	_ ,	Lip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	Agent: miliar with and accept t	he obligations of the position	m.
Sionature at	New Registered Agent,	if changing	
Signature of	The second contraction	A	
Check if applicable			

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)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	РТ	Denise Rodriguez	18735 SW 218 Street
Add X Remove			Miami FL 33170
2) Change	РT	Angel Sanabria	18735 SW 218 Street
Add			Miami Fl. 33170
X Remove 3) Change			
Add			
Remove			
4) Change	•		
Add Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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	ent provides for an	exchange, reclass	sification, or can	cellation of issued.	shares,	
lf an amendme	implementing the	amendment if no	t contained in th	e amendment itsel	<u>f:</u>	
If an amendme	olicable, indicate N/2	4)	-			
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
9/30/2021 Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will n document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shaction was not required.	areholder
■ 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	F- 1 1 2027 AUG - 8
"The number of votes cast for the amendment(s) was/were sufficient for approval by	والمترجينين
(voting group)	Z [11
Dated 10/01/2021	t: 53
(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)	
Zoila V. Gomez	
(Typed or printed name of person signing)	
President	
(Title of person signing)	