P110000109217

(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

Division of Corporations NAME OF CORPORATION: KIDZ COLLEGE, INC DOCUMENT NUMBER: P11000109217 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LINDA LATSON Name of Contact Person KIDZ COLLEGE, INC Firm/ Company 6558 OLD WINTER GARDEN RD Address ORLANDO, FL 32835 City/ State and Zip Code DRS@TAXDRX.COM E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARJORIE JOSEPH

TO: Amendment Section

Name of Contact Person

at (407) 218-4200
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

(Name of Corporation as currently filed with the	Florida Dept. of State)
P11000109217	
(Document Number of Corporation ((if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corporation:	The new
uame must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the "P.A."
3. Enter new principal office address, if applicable:	6558 OLD WINTER GARDEN RD
Principal office address <u>MUST BE A STREET ADDRESS</u>)	ORLANDO, FL 32835 , 275 6
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6558 OLD WINTER GARDEN RD
	ORLANDO, FL 32835
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres Name of New Registered Agent	ress in Florida, enter the name of the
(Florida st	reet address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent	t:

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)

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.

Example: X Change	<u>PT</u> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sally	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	<u>5</u>	KING, BREAHNA C	6556 OLD WINTER GARDEN RD
Add			ORLANDO FL 32835
Remove			
2) X Change	P.	LATSON, LINDA	6558 OLD WINTER GARDEN RD
Add			ORLANDO FL 32835
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	****		
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<u> </u>	
A STANCE OF THE	
- All State of the	
an amendment provides for an exch-	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

The date of each amendment(s) a	doption: 8/22/2012
Effective date <u>if applicable</u> :	3/22/2012
<u></u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder
	director, president or other officer – if directors or officers have not been ed, by an incorporator if in the hands of a receiver, trustee, or other court
	nted fiduciary by that fiduciary)
	LINDA LATSON
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)