(Red	questor's Name)	
(Add	iress)	
	dress)	
	//State/Zip/Phone	e#) MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	<del> </del>
Certified Copies	Certificates	s of Status
Special Instructions to f	Filing Officer:	

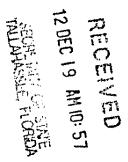
Office Use Only





700241902287

12/19/12--01014--017 \*\*35.00



12 DEC 19 AH 11: 06

## **COVER LETTER**

Division of Corporations
NAME OF CORPORATION: Kids Kingdom Learning Center, Incomment number: P1200000 7319
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Laura Brown Name of Contact Person
Kids Kingdom Learning Center
890 N. Hwy 19
Palatta, Flate and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (904) 240-2824  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status  \$\sigma \frac{1}{2} \\$43.75 Filing Fee & Certificate of Status  \$\sigma \frac{1}{2} \\$43.75 Filing Fee & Certificate of Status

## Mailing Address

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

## Street Address

(Additional copy is

enclosed)

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certified Copy

(Additional Copy is enclosed)

Articles of Amendment

to

•	to Articles of Incorporation of	See J. Land John J. Land
Tenderloving	Care Kids TN	C 12 DEC 19 AHII: 06
P 1200000 73)	rently filed with the Florida Dept. of State)	SECRETARY OF STATE TALLAHASSEE FLORIDA
(Document Nu	umber of Corporation (if known)	
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	5, Florida Statutes, this <i>Florida Profit Corporation</i>	on adopts the following amendment(s)
	the word "corporation," "company," or "Inc n "Corp," "Inc," or "Co". A professional col	
B. Enter new principal office address, if ag (Principal office address MUST BE A STRE		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF	Oa C	trile, FL 32218
D. If amending the registered agent and/or new registered agent and/or the new registered agent agen	registered office address in Florida, enter the	name of the
Name of New Registered Agent	Laura Brown	
$\overline{\mathcal{L}}$	GEOTAIA OA (Florida street addres)	た は
New Registered Office Address:	Jacksonville, Flo	orida FL 3 22 18
Da	ging Registered Agent: I agent. I am familiar with and accept the oblig  ure of New Registered Agent, if changing	ations of the position.

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	PT Johr	1 Doe			
X Remove	<u>V</u> <u>Mik</u>	e Jones			
X Add	SV Sall	y Smith		·	
Type of Action (Check One)	Title	Name		<u>Addres</u> s	
1) Change	P	Aundrex	/Erica J	adizar 890N Hay 10	Ť
Add Remove				Palatka, FC	
2) Change	<u>04</u>	Laura	4.Brow	N 890 N Hwy 19 Palatka, FL	Z
Remove  3) Change Add Remove		Anth	ony C. Boy	d 1415 Napoteon alatra, FL	St:
4) Change	<u>V</u>	Thom	ns LiBrou	Oak Ct	•
Remove				Jacksonville, EC3	1918
5) Change			·		
Add					
Remove					
6) Change	<del></del>				
Add					
Remove					

	sheets, if necessary).	(Be specific)	(s) here:		
				<del></del>	
	`				
				····	
•				· · · · · · · · · · · · · · · · · · ·	
•					
			······································		
	<del></del>		<del></del>		
			····		
				,	
an amendment r	provides for an exc	hange, reclassificat endment if not cont	ion, or cancellation	on of issued shares,	
	plementing the amo	enament it not cont	ained in the amei	iament itself:	
erovisions for im	able, indicate N/A\				
rovisions for im (if not applica	able, indicate N/A)				
orovisions for im (if not applica	able, indicate N/A)				
orovisions for im (if not applica	able, indicate N/A)				
orovisions for im (if not applica	able, indicate N/A)				
orovisions for im (if not applica	able, indicate N/A)				
orovisions for im (if not applica	able, indicate N/A)				
orovisions for im (if not applica	able, indicate N/A)				
orovisions for im (if not applica	able, indicate N/A)		·		
orovisions for im (if not applica	able, indicate N/A)				
rovisions for im (if not applica	able, indicate N/A)				
rovisions for im (if not applica	able, indicate N/A)				

The date of each amendment(s) adoption: November 28, 2012
Effective date if applicable: December 192013
(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 11-28-2012
Signature Lawa Rown
(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)
Layra Brown
(Typed or printed name of person signing)
President
(Title of person signing)