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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: KOALA EARLY I	EDUCATION CENTER IN	C
DOCUMENT NUMBI			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
(GERARDO PEREIRA QUIN	VTERO	
-		Name of Contact Person	
_		Firm/ Company	
5	5645 MAUNA LOA BLVD	18 APT 206	
		Address	
5	SARASOTA, FL 34240		
_		City/ State and Zip Code	2
	E-mail address: (to be us	sed for future annual report	notification)
		·	
For further information	concerning this matter, pleas	se call:	
GERARDO PEREIRA	QUINTERO	941 at (539-1419
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment of State:
S35 Filing Fee	□S43.75 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)
Amei Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, F1, 32301

Articles of Amendment to Articles of Incorporation of

	LY EDUCATION CENTER IN	ED	RIY	A FA	OALA	K
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(Name of Corporation as c	urrently filed	with the Florida	Dept. of State)		
P12000066853						
(Document Nu	ımber of Corpo	ration (if known)				
Pursuant to the provisions of section 607,1006, Florida Statulits Articles of Incorporation:	es, this <i>Florida</i>	ı Profit Corporatio	on adopts the f	ollowing	g amen	idment(s)
A. If amending name, enter the new name of the corpora	<u>tíon:</u>					
					The	new
name must be distinguishable and contain the word "con "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc word "chartered," "professional association," or the abbrev	c," or "Co"	ompany," or "inc A professional co	corporated" or rporation name	r the ab e must c	- obrevia contair	ution 1 the
B. Enter new principal office address, if applicable:				· · ·	~	
(Principal office address <u>MUST BE A STREET ADDRESS</u>				<u> </u>	7.4	
					En O	-
					— လှ	 -
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)					_:	()
(Stating dualess State be A 1051 OFFICE DOS)				-:; -	ري) (ير)	
			-		-	
				· ; •		
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		Florida, enter the	e name of the			
Name of New Registered Agent				_		
(F	lorida street addi	ress)				
New Registered Office Address:			, Florida_			
	(City)			(Zip (⊆ode)	
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f	d Agent: amiliar with an	d accept the oblig	ations of the pe	osition.		
Signature	of New Register	red Agent, if chang	ging		-	

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>	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	MRS	ADELINA I VERA	4185 Berkshire Dr
Add XX Remove			SARASOTA, FL 34241
2) Change Add	•—		
Remove			
3) Change Add			
Remove 4) Change			
Add			
5) Change			
Add			
б) Change		_	
Add			

(Attach additional sheets, if necessary).	ticles, enter change(s) (Be specific)			
		-		
				 -
		,		
		·		<u> </u>
				- -
				
		_		
	<u> </u>			
If an amendment provides for an ex- provisions for implementing the am	change, reclassification	m, or cancellation of ined in the amendme	<u>issued shares,</u> nt itself:	
(if not applicable, indicate N/A)	icination in account		<u></u>	
				

	09/12/2024	
The date of each amendment(s) ad	option:	if other than the
late this document was signed.		
	2/2024	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b locument's effective date on the De	lock does not meet the applicable statutory filing requirements, this coartment of State's records.	late will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment flicient for approval.	r(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	neni
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	pted by the board of directors without shareholder action and sharehol pted by the incorporators without shareholder action and shareholder	der
09/12/2023 Dated	John Town	
selecte	irector president or other officer – if directors or officers have not bee d, an incorporator – if in the hands of a receiver, trustee, or other could fiduciary by that fiduciary)	n urt
	GERARDO PERERIRA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	