Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : MARTIN ACCOUNTING & TAX SERVICE, INC

Account Number : I20060000012 Phone : (305)826-5886 Fax Number : (305)722-0535

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN

A & G DAYCARE LEARNING CENTER CORP

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count . | 01 |
| Estimated Charge | \$35.00 |

AUG 12 2019

I ALBRITTON

Electronic Filing Menu

Corporate Filing Menu

Help.

Articles of Amendment to Articles of Incorporation of

34

A & G DAYCARE LEARNING CENTER CORP

| (Name of Composition | n as currently filed with | the Florida Dent of St | ate) |
|--|--|--|--|
| (Hame or Corporation | • | tite (jorida Depe di de | · · |
| | P13000075825 | | |
| (Docume | ent Number of Corporation | n (if known) | |
| Pursuant to the provisions of section 607.1006, Florida tits Articles of Incorporation: | Statutes, this <i>Florida Pro</i> | fit Corporation adopts the | ne following amendment(s) |
| A. If amending name, enter the new name of the cor | poration: | • | |
| | : | | T (|
| name must be distinguishable and contain the word "Corp.," "Inc." or Co.," or the designation "Corp. word "chartered" "professional association," or the a | " "Inc," or "Co". A pro | ny," or "incorporated" ofessional corporation n | The new or the abbreviation ame must contain the |
| B. Enter new principal office address, if applicable: | | | |
| (Principal office address MUST BE A STREET ADDI | <u>RESS</u>) | | _ |
| | | | |
| | | | <u> </u> |
| on the second section of the section | | , | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX | VO | | |
| (Mulang uuures may be ay our or riversor | <u></u> | | |
| | | | <u>_</u> |
| | | | Ö |
| | | · <u> </u> | 0, |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered of | ed office address in Flor office address: | ida, enter the name of t | <u>he</u> |
| | • | | |
| Name of New Registered Agent | | | |
| | | | |
| | (Fiorida street address) | | |
| New Registered Office Address: | • | , Flori | da |
| WEW RESIDIETER Office Made 635. | (City) | | (Zip Code) |
| • | | | • |
| | | | |
| New Registered Agent's Signature, if changing Regi | istered Agent: | | |
| I hereby accept the appointment as registered agent. | I am familiar with and ac | cept th e obligations of th | e position |
| | | | |
| | | | |
| | | | |
| Signa | ature of New Registered A | loant 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 | ĽΊ | John Doe | | · | | |
|-------------------------------|--------------|-------------|-----------|-----|---|----------------------|
| X Remove | <u>v</u> | Mike Jones | | | | |
| X Add | <u>\$V</u> | Sally Smith | | | | |
| Type of Action (Check One) | <u>Title</u> | Na | <u>me</u> | | | <u>Address</u> s |
| 1) Change | VPD | PE | na, ivan | | _ | 21953 SW 97TH PL |
| Add | | | | | - | CUTLER BAY, FL 33190 |
| X Remove | | | | | | |
| 2) Change | | | | | _ | |
| Add | | | | | | |
| Remove | | | • | | | |
| 3) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 4) Change | | | | ··· | | |
| Add | | | | • | | |
| Remove | | | • | | | |
| 5) Change | | _ | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 6) Change | | | | | | - |
| Add | | | | | | |
| Remove | | | | | | |

| | (Be specific) | |
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| an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A) | inge, reclassification, or cancellation of issued sh desent if not contained in the amendment itself: | बाह्य. |
| provisions for implementing the amer | inge, reclassification, or cancellation of issued sh dment If not contained in the amendment itself: | जाहर |
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| The date of each amendment(s) a | deption: | if other than the |
|--|--|-------------------------------|
| date this document was signed. | | , |
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the Di | block does not meet the applicable statutory filing requirements, this department of State's records. | ate will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were ad- by the shareholders was/were sa | opted by the shareholders. The number of votes east for the amendment(ifficient for approval. | s) |
| ☐ The amendment(s) was/were approvided for must be separately provided for | proved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s): | ent |
| "The number of votes cast | for the amendment(s) was/were sufficient for approval | |
| by | 11 | , |
| | (voting group) | |
| action was not required. The amendment(s) was/were add | opted by the board of directors without shareholder action and shareholder | cr |
| action was not required. | | |
| AUGUST Dated | 7TH, 2019 | |
| | | |
| Signature | | |
| selecte | irector, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary) | t |
| | GRISEL PENA | |
| | (Typed or printed name of person signing) | |
| | PDT | |
| | (Title of person signing) | N |