P1400045109

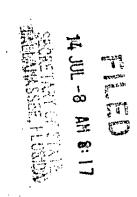
(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



100261649531

07/08/14--01025--009 **43.7S



JUL 2 4 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section

Division of Corpor	ations				
NAME OF CORPORA	ATION: The Ea	arly Educatio	n Center T. Inc.		
DOCUMENT NUMBE	er: <u>P14000</u>	045109			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
_	Daniel	1090100 Name of Contact Person			
	The Early E	Name of Contact Person Education Cen Firm/ Company	ler Т.		
_	1627 Poin	•	· · · · · · · · · · · · · · · · · · ·		
_	Pembioke	Address Pines FL 3	33025		
		City/ State and Zip Code	•		
	danieltoguic E-mail address: (to be us	ed for future annual report	COM notification)		
For further information	concerning this matter, pleas	se call:			
Daniel	Toquica	at (954	661 0645 de & Daytime Telephone Number		
Name of	Contact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment 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)		
	ng Address	Street Address			
	dment Section on of Corporations	Amendment Section Division of Corporations			
	Box 6327		Building xecutive Center Circle		
t allar	DANCE FE. 17.114	2001 E	xecouve Cemer Cifcle		

Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation
of

FILED

7	he	Early	Educa	tion	Center	Τ., Ξ	Inc	14. JUL -	8 AM	8: 17	ł
	(<u>N</u> a	me of Corpo	ration as curr	ently filed v	with the Flori	da Dept. of	State) S	SCREET ALC	1 14 5	— Taif	
		P140	00045	109			.4,4	ELLUASS.	器,用	U. M.D.N.	,
	,	 	Document Nur		poration (if kn	own)	~			_ ` -	
Pursuant to its Articles	-		tion 607,1006,	Florida Sta	tutes, this <i>Flo</i>	rida Profit C	orporatie	on adopts th	e follow	ing ame	:ndment(s) to
A. If amen		ame, enter th	e new name o	f the corpo	ration:					The	new
"Corp.," "	Inc., "	or Čo., " or th	and contain the designation of association,"	"Corp, " ".	Inc," or "Co"	A profess				abbrev	riation
			address, if app			1627	Point	ciana	Dr.	_	
(Principal a	office a	ddress <u>MUST</u>	<u> BE A STREE</u>	T ADDRE	<u>SS</u>) -	Pemb	ioke	ciana Pines	FL	_	
					_	3302	5				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		-	1627	Po	inciana	PI	<u>. </u>				
			_	Pembi	oke	Pines	FC				
					_	3302	5				
new reg	istere		agent and/or r the new regi			in Florida, e	enter the	name of th	<u>ie</u>		
<u>Ne</u> -	w Regi	stered Office .	Address:	N/A	(Florida street d	address)	, Flo	orida	6.11	_	
			ture, if changi						o Code)		
I hereby acc	cept the	appointment 	as registered a			·		itions of the ——	position	1.	
			Signatu	re of New R	egistered Agei	nt, if changin	g				

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	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Sandra Leon	4311 SW 531d AVE
Add			Davie FL 33314
Remove			
2) Change	VP	Marcela León	1629 Poinciana Dr.
Add			Pembioue Pines
Remove			FL 33025
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change	•		
Add			
Remove			

11	h additional sheets, if necessary). (Be specific)	
	A A	
	<u> </u>	
		
	<u>amendment provides for an exchange, reclassi</u>	fination or consollation of issued shares
If an a		iteation, of cancenation of issued situles,
lf an a provi	isions for implementing the amendment if not	contained in the amendment itself:
<u>provi</u> (į	isions for implementing the amendment if not (if not applicable, indicate N/A)	contained in the amendment itself:
<u>provi</u> (į	isions for implementing the amendment if not (if not applicable, indicate N/A)	contained in the amendment itself:
<u>provi</u> (į	isions for implementing the amendment if not	contained in the amendment itself:
<u>provi</u> (į	isions for implementing the amendment if not (if not applicable, indicate N/A)	contained in the amendment itself:
<u>provi</u> (į	isions for implementing the amendment if not (if not applicable, indicate N/A)	contained in the amendment itself:
<u>provi</u> (į	isions for implementing the amendment if not (if not applicable, indicate N/A)	contained in the amendment itself:
<u>provi</u> (į	isions for implementing the amendment if not (if not applicable, indicate N/A)	contained in the amendment itself:
<u>provi</u> (į	isions for implementing the amendment if not (if not applicable, indicate N/A)	contained in the amendment itself:
<u>provi</u> (į	isions for implementing the amendment if not (if not applicable, indicate N/A)	contained in the amendment itself:
<u>provi</u> (į	isions for implementing the amendment if not (if not applicable, indicate N/A)	contained in the amendment itself:
<u>provi</u> (į	isions for implementing the amendment if not (if not applicable, indicate N/A)	contained in the amendment itself:
<u>provi</u> (į	isions for implementing the amendment if not (if not applicable, indicate N/A)	contained in the amendment itself:

The date of each amendment(s) adoption: 06/09/2014	, if other than th
date this document was signed.	
Effective date if applicable:	
(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.	
Dated06/30/14	
Dated OG/30/14 Signature OG/30/14	
(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)	
Toquica (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	