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COVER LETTER

Division of Corporations
NAME OF CORPORATION: SMALL WORLD MONTESSORI 5, SNC.
DOCUMENT NUMBER: P 15000021557
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
KIRAN REHMATULUAH
Name of Contact Person
Firm/ Company
7517 FOSSIL RIOGE DA. Address
Address
FRISCO. TX 75034
FRISCO TX 75034 City/ State and Zip Code
KIRAN. PRADHAN @ hotmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
KIRAN REHMATULAH at (469) 888-1983 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$\ \$35 Filing Fee \$\ \Bigcup \$\\$43.75 Filing Fee & \Bigcup \$\\$43.75 Filing Fee & \Bigcup \$\\$52.50 Filing Fee

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Mailing Address

TO: Amendment Section

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

Certificate of Status

Street Address

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

Certificate of Status

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is enclosed)

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Articles of Amendment to Articles of Incorporation of

15 MAY -6 PH 2: 46

SMALL WORLD	MONTESCORT	15,9NC.	
	f Corporation as currently		pt. of State)
•	P15000	1021557	
	(Document Number of	Corporation (if known)	····
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	Torida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new na		1	
•	1	1/A.	The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the designation of "chartered," "professional associated. B. Enter new principal office address, if (Principal office address MUST BE A ST	ntion "Corp," "Inc," or "C ion," or the abbreviation "F Lapplicable:	o". A professional corpo .A."	porated" or the abbreviation
C. Enter new mailing address, if applic (Mailing address MAY BE A POST C		A H	
D. If amending the registered agent and new registered agent and/or the new	registered office address:		
Name of New Registered Agent	CHRISTINA	CHRISTIANS	FM
	364 NW 153	M LOVE, PEMB	EN ROKE PINES, FL 33028
New Registered Office Address:			_, Florida
	(C	City)	(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe		th and accept the obligatio	ns of the position.
	Musters	Swattan se visitered Agent, if changing	en .

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.

X Change	PT Joh	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	S	AMMIR VAYANI	16441 SW 29 mSt.
Add		·	MIRAMAR, FL 33027
X_ Remove			
2) Change			- I SEC
Add			CRETY LANGE
Remove			
3) Change			PEOP
Add			2:146
Remove			
4) Change			
Add			
Remove			
5) Change		-	
Add			
Remove	•		
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	ALL -	
	N/A	
		<u> </u>
		υπ r
		
		- P
		5
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
	N/A.	
	1	

The date of each amendment(s) adoption: 91812 28, 2015	, if other than the
date this document was signed.	
Effective date if applicable: May 1, 2015	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	
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):	SEC TALL
"The number of votes cast for the amendment(s) was/were sufficient for approval	SECRETY LLAHY
by" (voting group)	-6 NSS
(voting group)	:13 -135
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	OF STATE OF STATE PH 2: 46
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	6 D
Dated 4/28/15	
Signature	
Signature (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)	
KIRAN REHMATULLAH	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	