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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: LITTLE EINSTEIN AUTISM CHILDREN SENVICES, INC P18000013673 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: 65184 FERNANGEZ
Name of Contact Person Firm/ Company 999 NW 7th STREET AFT

Address

MIAMI FT 33 12 G

City/ State and Zip Code geyfder of groil.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DEISY FERNANDA at (786) 8134028

Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filling Fee Certificate of Status Certified Copy 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

Articles of Incorporation of

LITTLE EINSTEIN	DUTISM C	1119251	DEQUICES.	INC
	orporation as currently t			
	P 13000			
	(Document Number of C	orporation (it kno	own)	
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	5, Florida Statutes, this Fl	orida Profit Corp	oration adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name	of the corporation:			
				The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	n "Corp," "Inc," or "Co	". A professione		the abbreviation
B. Enter new principal office address, if ap	7999	NW 7+	4 STREET	
(Principal office address MUST BE A STRE	DPT			
			. Fl 33i	26
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF	7999	NW 7	" STREET	
		A	PT 104	
	MIDMI	FL 331	176	
D. If amending the registered agent and/or new registered agent and/or the new reg		s in Florida, ente	r the name of the	
Name of New Registered Agent	GERY	FERNA	NDEZ	
	7999 N		STREET.	DP1 104
N D (1000 A)	MILA		5 1.11	27:26
New Registered Office Address:	(City)		, Florida	(Zip Code)
New Registered Agent's Signature, if chang I hereby accept the appointment as registered		h and accept the o	obligations of the pos	ition.
	Aus.	<u> </u>		
	Signature of New Regi	istered Agent, if c	hanging	<u> </u>

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	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P	FLETTES MARELYS	6877 NW 179 ST.
Add			4°5 19A
Remove			MINCERM, FL 33015
2) X Change	P	BEISY FERNAMICE	7999 NW 7" STREET
Add			APT 104
Remove			MIRMI FL 33126
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			
Remove			

an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/4)	
provisions for implementing the amendment if not contained in the amendment itself:	
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(y not applicable, material N/A)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(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 redocument's effective date on the Department of State's records.	not be listed as the
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.	
Dated08 13 7018	
Signature (By a director, president or other officer – if directors or officers have not been	_
(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)	
KS16:4 T-5-201001057	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	