## P18000019494

| (Re                     | questor's Name)  |             |
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| (Cit                    | y/State/Zip/Phon | e #)        |
| PICK-UP                 | ☐ WAIT           | MAIL        |
| (Bu                     | siness Entity Na | me)         |
| (Do                     | cument Number)   |             |
| Certified Copies        | _ Certificate:   | s of Status |
| Special Instructions to | Filing Officer:  |             |
|                         |                  |             |
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S TALLENT JUL 2 4 2019 SECRETARY OF STATE

Amend

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPOR           | ATION: Little Angels Acad   | lemy Learning Center Inc.  |  |
|--------------------------|---|--|--|
| DOCUMENT NUMB            |   |  |  |
| The enclosed Articles    | of Amendment and fee are st                                       | ibmitted for filing.   |  |
| Please return all corres | pondence concerning this ma                                       | tter to the following:   |  |
|                          | Shameka Anderson  |  |  |
|                          |   | Name of Contact Person   | n  |
|                          | Little Angels Academy Learn                                       | ning Center Inc.   |  |
|                          |   | Firm/ Company  |  |
|                          | 623 W. Lancaster Road   |  |  |
| •                        |   | Address  |  |
|                          | Orlando Fl. 32809   |  |  |
| •                        |   | City/ State and Zip Cod  | e  |
| Debra                    | beatrice@yahoo.com  |  |  |
|                          | ***   | sed for future annual report                                       | notification)  |
|                          |   |  |  |
| For further information  | concerning this matter, pleas                                     | se call:   |  |
| Shameka Anderson         |   | at (   | 353-1184   |
| 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  | artment of State:  |
| S35 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) |
| Ame<br>Divis             | ing Address<br>ndment Section<br>sion of Corporations<br>Box 6327 | Amend<br>Divisio   | Address<br>Iment Section<br>on of Corporations<br>Building                             |

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

| Little Angels Academy Learning Center Inc.   |  |
|--|--|
| (Name of Corporation as currently filed with the   | ie Florida Dept. of State)   |
| P18000019494   |  |
| (Document Number of Corporation  | (if known)   |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit</i> its Articles of Incorporation:  | Corporation adopts the following amendment(s) to                                     |
| A. If amending name, enter the new name of the corporation:  |  |
|  | The new  |
|  | v. or incorporatea or the appreviation   |
| "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | v," or "incorporated" or the abbreviation essional corporation name must contain the |

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

Pervis D. Giles

6417 Brockbank Dt.

(Florida street address)

New Registered Office Address:

Orlando
Orlando
, Florida
(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

A PCOUS D CALLS Jr.
Signature of New Registered Agent, 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             | <u>PT</u> | John Doe    |                     |                    |
|-------------------------------|-----------|-------------|---------------------|--------------------|
| $\underline{X}$ Remove        | <u>V</u>  | Mike Jon    | <u>es</u>           |                    |
| X Add                         | <u>sv</u> | Sally Smith |                     |                    |
| Type of Action<br>(Check One) | Title     | į           | Name                | <u>Addres</u> s    |
| 1) X Change                   | P         | _           | Cierra Graham       | 6417 Brockbank Dr. |
| Add                           |           |             |                     | Orlando Fl. 32809  |
| X Remove                      |           |             |                     |                    |
| 2) Change                     | P         | _           | Pervis D. Giles Jr. | 6417 Brockbank Dr. |
| X Add                         |           |             |                     | Orlando Fl. 32809  |
| Remove                        |           |             |                     | <del></del>        |
| 3 ) Change                    |           |             |                     |                    |
| Add                           |           |             |                     |                    |
| Remove                        |           |             |                     |                    |
|                               |           |             |                     |                    |
| 4) Change                     |           |             |                     |                    |
| Add                           |           |             |                     |                    |
| Remove                        |           |             |                     |                    |
| 5) Change                     |           |             |                     |                    |
| Add                           |           |             |                     |                    |
| Remove                        |           |             |                     |                    |
|                               |           |             |                     |                    |
| 6) Change                     |           | -           |                     | <del></del>        |
| Add                           |           |             |                     |                    |
| Remove                        |           |             |                     |                    |

| E. If amending or adding additional Arti<br>(Attach additional sheets, if necessary). | (Be specific)  |
|---|--|
| N/A   |  |
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| F. If an amendment provides for an exch   | lange, reclassification, or cancellation of issued shares, |
| provisions for implementing the amer<br>(if not applicable, indicate N/A)             | ndment if not contained in the amendment itself:           |
| N/A   |  |
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| 6/27/2019  |                           |
|--|---------------------------|
| The date of each amendment(s) adoption:date this document was signed.  | , if other than the       |
| 6/27/2019  |                           |
| Effective date if applicable:  (no more than 90 days after amendment file date)  | <del></del>               |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date w document's effective date on the Department of State's records.                           | vill 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.   |                           |
| Dated 1 6/27/19  |                           |
| Signature X Perus D Cyles Jr  (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)   |                           |
| Peruis D (412) JE.   |                           |
| (Typed or printed name of person signing)  |                           |
| (Title of person signing)  |                           |
| (Title of person signing)  |                           |