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Special Instructions to F	Filing Officer:	

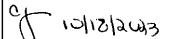


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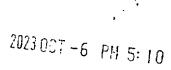
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	ORATION: Indian Rocks Todd	ller Montessori FL Inc			
DOCUMENT NUM	ABER: P20000032057				
	es of Amendment and fee are su	bmitted for filing.			
Please return all cor	respondence concerning this ma	tter to the following:			
	Bernard Ribordy				
		Name of Contact Person	1		
	Ribordy and Associates Inc				
		Firm/ Company			
	8780 Seminole Blvd				
		Address			
	Seminole, FL 33772				
		City/ State and Zip Code	•		
	brib165259@aol.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informat Bernard Ribordy	ion concerning this matter, pleas	se call:			
Nam	e of Contact Person		de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



Indian Rocks Toddler Montessori FL Inc

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

(Name of Corporation as	currently filed with the Florida Dept. of State)	
P20000032057		
(Document N	Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statitis Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the corpor	ration:	
		The new
name must he distinguishable and contain the word "corpor "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation	"Co". A professional corporation name musi conta	on "Corp.," in the word
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRES</u>	(22	
(Principal office address MOST BE A STREET ADDRES		
		
and the Marking		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered onew registered agent and/or the new registered offic	office address in Florida, enter the name of the	
-		
Name of New Registered Agent		
	(6)	
,	(Florida street address)	
New Registered Office Address:	(City), Florida	Code)
	(4.67)	
New Registered Agent's Signature, if changing Register	red Agent:	
I hereby accept the appointment as registered agent. I am	n familiar with and accept the obligations of the position.	
Signature	e 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	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Sonal Upadhyay	13125 Wilcox Rd
x Add	-	-	Largo, FL 33774
Remove			
2) Change			_
Add			
Remove 3) Change			
Add			<u></u>
Remove			
4) Change			
Add			
Remove			
5) Change			······································
Add			
Remove			
6) Change			
Add			
Remove			

lditional Owner	eets, if necessary).				
					
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			sion or consulatio	n of icenad chares	
		range, recrassifics	nion, or cancenatio	d-ant itselfe	
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	10/02/2023
The date of each amendment(s) a	doption:, if other than th
date this document was signed.	
	02/2023
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	for the amendment(s) was/were sufficient for approval
by	
	(voting group)
10/2/2023 Dated	A P
Signature 🔨	
(By a c	lirector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	Dana Turner
	(Typed or printed name of person signing)
	President
	(Title of person signing)