P23000061223

Office Use Only



300432066293

07/11/24--01022--019 **43.75





COVER LETTER

TO: Amendment Section Division of Corporations

> Amendment Section Division of Corporations

P.O. Box 6327

NAME OF CORPO	RATION: KIDS FIRST DAY	CARE INC			
DOCUMENT NUM	BER: P23000061223				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	MARIA E. FOURNIL				
		Name of Contact Person			
	KIDS FIRST DAY CARE INC				
	Firm/ Company				
	814 NORTH MAIN ST				
	Address				
	KISSIMMEE, FL 34744				
	City/ State and Zip Code				
	INFO@NONALSACCOUNTING. COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
MARIA E. FOURNI	L	at (407	288-9406		
Name	of Contact Person		le & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:		
S35 Filing Fee	■S43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	iling Address endment Section	Street / Amendi	Address ment Section		

Division of Corporations

The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation

of

KIDS FIRST DAY CARE INC			FILEN
(Name o	of Corporation as currently	filed with the Florida Dep	ot. of State)
P23000061223			2024 JUL 11 AH 7: 39
	(Document Number of	Corporation (if known)	Same and the same
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation a	idopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A		" or the abbreviation "Corp.,"
B. Enter new principal office address, (Principal office address MUST BE A S			
(comequality) see a come in the contract of th	<u> </u>		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			
D. If amending the registered agent an new registered agent and/or the new			ume of the
-	MARIA E. FOURNILL		
Name of New Registered Agent	MARIA E. POURNIEL		
	814 NORTH MAIN ST		
	(Florida stre	ret address)	
New Registered Office Address:	KISSIMMEE		34744 . Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	tered agent. I am familiur w	rith and accept the obligatio	
	Signature of New Re	egistered Agent, if changing	
Check if applicable ☐ The amendment(s) is/are being filed p	oursuant to s. 607.0120 (11) (e), F.S.	

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	MARIA E. FOURNILL	814 NORTH MAIN ST
X Add			KISSIMMEE, FL 34744
Remove			11
2) Change	Ь	MARIA E. ANTONUCCI	814 NORTH MAIN ST
Add			KISSIMMEE, FL 34744
X Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ry). (Be specific)			
1-11		<u>-</u> -	· · · · · · · · · · · · · · · · · · ·	
			· · · · · · · · · · · · · · · · · · ·	
	 -			
		·	···	
				-
		· - · · · · · · · · · · · · · · · · · · ·		

	-			
	<u></u>			
· · · · · · · · · · · · · · · · · · ·	·			
an amendment provides for an e	exchange, reclassification,	or cancellation of issu-	ed shares,	
rovisions for implementing the a	amendment if not containe	d in the amendment it	self:	
(if not applicable, indicate N/A)			
			· · · · · · · · · · · · · · · · · · ·	1
				1
				1
				,

, -

, •

•	06/20/2024	
The date of each amendment(s) adoption	on:	, if other than the
date this document was signed.		
Effective date <u>if applica</u> ble:		
	(no more than 90 c	days after amendment file date)
Note: If the date inserted in this block of document's effective date on the Departm	does not meet the applical nent of State's records.	ole statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by action was not required.	by the incorporators, or bo	ard of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The r	number of votes cast for the amendment(s)
must be separately provided for each "The number of votes cast for the	voting group entitled to vo e amendment(s) was/were	sufficient for approval
by	(voting group)	,,,,,,,,
O6/20/2024 Dated Signature (By a director selected, by a appointed fid	r, president or other officer	- if directors or officers have not been ands of a receiver, trustee, or other court
	(Typed or printed na	me of person signing)
રમુવવ	SIDENT	- - -

(Title of person signing)