## P930000 42292

(Requestor's N	Vame)
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JUN 30 2021

## **COVER LETTER**

TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION:Just	kids centers Inc			
DOCUMENT NUMBER: <u>P93000</u> 0	42292			
The enclosed Articles of Amendment and fee are st				
Please return all correspondence concerning this ma	atter to the following:			
Isabel	6 Perez			
Just	Name of Contact Person  Kids Centers Inc			
	i into Company			
<u> 12470 S</u>	Naddress			
Miani, F	City/ State and Zip Code			
	City/ State and Zip Code			
Taction	252@q01.com			
	ised for future annual report notification)			
For further information concerning this matter, plea	ise call:			
Isabel 6 Perez	at ( <b>3</b> 05 ) SZS – 3306  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:			
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address	Street Address			
Amendment Section Division of Corporations	Amendment Section			
P.O. Box 6327	Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment

to

## Articles of Incorporation

οf

Just Icids	centers	TUC			
(Name of Corporate			la Dept. of State)	<u>-</u>	_
P 9300	00422	92			
(Docur	ment Number of C	Corporation (if know	π)		-
Pursuant to the provisions of section 607.1006, Florid ts Articles of Incorporation:	a Statutes, this <i>Fl</i>	orida Profit Corport	ation adopts the follo	wing ame	endment(s) to
A. If amending name, enter the new name of the c	orporation:				
				The	new
name must be distinguishable and contain the word "c "Inc.," or Co.," or the designation "Corp." "Inc, "chartered," "professional association," or the abbre	" or "Co". A p.	npany," or "incorpo professional corpor	rated" or the abbrev ition name must co	iation "C	orp"
3. Enter new principal office address, if applicable Principal office address MUST BE A STREET ADD					
					<del></del>
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	nv.				
(maining duaress MAT BE A POST OFFICE BO	<u>/X</u> )				
	•				
			<u> </u>	_	<del></del>
<ol> <li>If amending the registered agent and/or registered new registered agent and/or the new registered</li> </ol>	red office addres office address:	s in Florida, enter t	the name of the		
Name of New Registered Agent	·				
				<del>.</del>	
	(Florida street	address)			
New Registered Office Address:			, Florida	21	2
	(Ci	ίλ.)		Zip Code)	
				المارية المارية	
iew Registered Agent's Signature, if changing Reg	istered Agent:			- ()	
hereby accept the appointment as registered agent.	l am familiar with	and accept the obli	gations of the positie	m:	
				ක	
				., .	`.
Signo	ature of New Regi.	stered Agent, if char	iging		

Check if applicable

<sup>☐</sup> The amendment(s) is/are being filed pursuant 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	PT John	ı Doc	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name O	<u>Addres</u> s
1) Change	VP	Alejandro Perez	12470 Su 8st Mani, FL 33184
Add			Miami, FL 33184
Remove			<u> </u>
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

taen aaamminan Sil	neets, if necessary).	(Be specific)				
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an amendment ni	rovides for an excl	nango reclassifi	estion or ean	callation of icer	ad charac	
ovisions for imp	lementing the ame	ndment if not c	ontained in the	e amendment i	tself:	
(if not applicab	ole, indicate N/A)				<u></u>	
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			<del></del>			
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no mo	re than 90 days after amendment file date)
<b>Note:</b> If the date inserted in this block does not meet document's effective date on the Department of State's r	he applicable statutory filing requirements, this date will not be listed as the ecords.
Adoption of Amendment(s) (CHECK O	<u>SE</u> )
The amendment(s) was/were adopted by the incorpor action was not required.	ators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the sharehold by the shareholders was/were sufficient for approval	
☐ The amendment(s) was/were approved by the shareho must be separately provided for each voting group each	
"The number of votes cast for the amendment(s	) was/were sufficient for approval
by	
by(voting group	<del>)</del>
Dated 5/12/2	21 2 J. Jerry
(By a director, president or c	ther officer – if directors or officers have not been  if in the hands of a receiver, trustee, or other court iduciary)
_15abe	printed name of person signing)
(Typed o	printed name of person signing)
Pa	sident
(Title of )	erson signing)

. .