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FEB 2 7 2013

COVER LETTER

TO: Amendment Section

Division of Corporations Smitty's Day Care Inc. NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Debbie's Accounting Service
Firm/Company 3575 Southfide Blud Jack sarville FL
City/ State and Zip Code E-mail address: (to be used for fundre annual report notification) For further information concerning this matter, please call: at (904) 733 - 4547 Area Code & Daytime Telephone Number 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 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment

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C V	FILED FEB 25 AMIII 38
Smitty's Day Care Inc. (Name of Corporation as currently filed with the Florida Dept. of State) - SEC	- 5 KM 11: 33
ALLA	HASSEF FIATE
	TO THE PROPERTY OF THE PARTY OF
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adoits Articles of Incorporation:	pts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorpora "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporati word "chartered," "professional association," or the abbreviation "P.A."	ated" or the abbreviation on name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	
D. If amending the registered agent and/or registered office address in Florida, enter the name	e of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street address)	
V D 1 Off Allering	
New Registered Office Address:, Florida, 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.

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> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	<u> / Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	PVST	Michelle S Gregerson	7710 Hilsdale Rd
Add		•	Jacksonville FL 32216
Remove			
2) Change	<u>VPSD</u>	Patsy Smith	7710 Hilsdale Rd Jacksonville FL 32216
Add Remove			Jacksonville IL Shalle
3)Change			
Add			
Remove			
4) Change			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attacl	h <i>additionai</i>	l sheets, if ne	ecessary).	(Be specific	hange(s) her c)			
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prov	visions for i	t provides f mplementin icable, indica	g the amen	inge, reclas dment if no	sification, or ot contained	cancellation	n of issued sh dment itself:	ares,
	-							
					 			

The date of each amendment(s) adoption: _	2/22/2013
Effective date if applicable:	2/22/2013
	(no more than 90 days after amendment file date)
Adoption of Amendment(s) (C	HECK ONE)
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amendment(s) approval.
	he shareholders through voting groups. The following statement ag group entitled to vote separately on the amendment(s):
	endment(s) was/were sufficient for approval
by	oting group)
The amendment(s) was/were adopted by th action was not required.	e board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by th action was not required.	e incorporators without shareholder action and shareholder
Dated2/22/	2013
Signature Micle	le Giegeison
selected, by an in	esident or other officer – if directors or officers have not been corporator – if in the hands of a receiver, trustee, or other court ry by that fiduciary)
**	Michelle Gregerson (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President/Director
	(Title of person signing)