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Amend/NC

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Alpha C	harter of Ex	cellence, Inc
DOCUMENT NUMBER: Nogooo	27417	
The enclosed Articles of Amendment and fee are submit	tted for filing.	
Please return all correspondence concerning this matter	to the following:	
Guarione (Name of Co	ontact Person)	
CNC (Firm/ C	Company)	······
1223 SW 4	th Street	
Miami f (City/ State a	lorida 33139 and Zip Code)	<u> </u>
E-mail address: (to be used for	or future annual report notification	n)
For further information concerning this matter, please ca	all:	
Sonia Lopez EVP (Name of Contact Person)	at (<u>305</u>) <u>642 - :</u> (Area Code & Daytime	3484 Ext. 123 Telephone Number)
Enclosed is a check for the following amount made paya	able to the Florida Department of	State:
□ \$35 Filing Fee \$\	□ \$43.75 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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	rcle

Articles of Amendment Articles of Incorporation of

Miami Academy of Excellence, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Alpha Charter of Excellence, Inc. The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Migmi, Fl. 33135
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 of the
new registered agent and/or the new registered office address:
Name of New Registered Agent: Guarione M. Diaz
New Registered Office Address: (Florida street address)
<u> </u>
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 of 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
Pres.	Derrick Shelton	7990 SW 117th Ave Suite #135 Miami, Fl. 33183	_ □ Add _ ☑ Remove
V-Pres.	Isabel Navas	2940 NE 162 Terr. Miam: Lakes, F133	_ □ Add Prs ⊠ Remove
			_
	ling or adding additional Articles, enter dditional sheets, if necessary). (Be speci		

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
Pres.	Guarione M. Oigz	1223 SW Y Street Hiami, Fl. 3313S	☑ Add ☐ Remove
EVP	Sonia lope 2	laa3 sw 4 street Miami, Fl. 3313S	
TREA	Andres Pazos	1223 SW 4 Street Miam: , F1. 33135	Add Remove
	ng or adding additional Articles, enter of ditional sheets, if necessary). (Be specifi		
0			
	-		

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>Sec</u>	<u>Cristing Santana</u>	1223 SW 457 Miami, F1. 3313S	⊠ Add □ Remove
DIR	<u>Celia Suarez</u>	210-174 Street Apartment 1811 Miami Beach, Fl. 3	□ Remove
D	Jessica Pergado	1223 SW 45+ Micmi, F1. 33135	D⊳Add
	g or adding additional Articles, enter of tional sheets, if necessary). (Be specifically additional sheets).		

The date of each at	nendment(s) adoption: $3-28-10$
	(date of adoption is required)
Effective date <u>if ap</u>	
	(no more than 90 days after amendment file date)
Adoption of Amen	dment(s) (<u>CHECK ONE</u>)
The amendment was/were suffici-	(s) was/were adopted by the members and the number of votes cast for the amendment(s) ent for approval.
	embers or members entitled to vote on the amendment(s). The amendment(s) was/were poard of directors.
	1
D	ated5-28-10
S	ignature On Dan
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	TSabel Navas (Typed or printed name of person signing)
	Vice - President (Title of person signing)

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