

n 17000010885

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

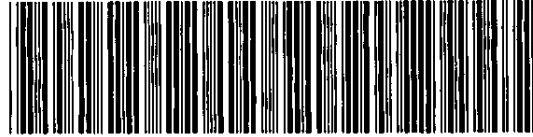
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900303637679

11/13/17--01012--005 **35.00

FILED
2017 NOV 13 PM 1:09
STATE OF MARYLAND
DEPARTMENT OF MARYLAND

RECEIVED
17 NOV 13 AM 12:50
MAY 11 2017
MAY 11 2017

NOV 13 2017
T. LEMIEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Capital Preparatory, Inc

DOCUMENT NUMBER: N17000010885

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Leanne Little
(Name of Contact Person)

Capital Preparatory Inc
(Firm/ Company)

PO Box 14264
(Address)

Tallahassee, Florida 32317
(City/ State and Zip Code)

lleague@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leanne Little at 850 284 6240
(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:

- \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status \$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 Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Capital Preparatory, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N17000610885

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____ 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)

2811 Industrial Plaza Dr.
Tallahassee, Florida 32301

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: _____

(Florida street address)

New Registered Office Address: _____

(City)

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

FILED
2017 NOV 13 PM 1:09
TALLAHASSEE, FLORIDA

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:

| | | |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u> |
| <input checked="" type="checkbox"/> Remove | <u>V</u> | <u>Mike Jones</u> |
| <input checked="" type="checkbox"/> Add | <u>SV</u> | <u>Sally Smith</u> |

Type of Action
(Check One)

Title

Name

Address

- | | | |
|---|---|--|
| <p>1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove</p> | <p><u>Director</u> <u>S. Dee Gamble</u></p> | <p><u>c/o 2811 Industrial Plaza Dr</u> <u>Tallahassee, FL 32301</u></p> |
| <p>2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove</p> | <p><u>Director</u> <u>Kristal P. Franklin</u></p> | <p><u>2811 Industrial Plaza Dr</u> <u>Tallahassee, FL 32301</u></p> |
| <p>3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove</p> | <p><u>Director</u> <u>Leanne Little</u></p> | <p><u>PO BOX 14264</u> <u>Tallahassee, FL</u> <u>32317</u></p> |
| <p>4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove</p> | <p>_____</p> | <p>_____</p> |
| <p>5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove</p> | <p>_____</p> | <p>_____</p> |
| <p>6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove</p> | <p>_____</p> | <p>_____</p> |

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

The company Capital Preparatory Inc. was first set up on 4/24/2017 as a LLC by two persons.

For the purpose of acquiring tax exempt status as a school changes were made on by Kristal Franklin to match the pending application on file with the IRS.

After a meeting the decision was made to add the equal partner from the existence of the company S. Dee Gamble's name to the corporations official paperwork.

The company operates as effective directors (3) three equally therefore the changes are being made on 11/13/2017 to represent a true dipretion.

No changes can be made without written consent.

The date of each amendment(s) adoption: 10/20/17, if other than the date this document was signed.

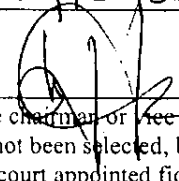
Effective date if applicable: 10/19/2017
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 11/13/2017

Signature 
(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)

Leanne Little
(Typed or printed name of person signing)

Director
(Title of person signing)