# P10000014233

(Re	questor's Name)	
(Ad	dress)	<del></del>
(Ad	dress)	
(Cit	y/State/Zip/Phone	» #)
PICK-UP		MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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SECRETARY FOR STATE DIVISION OF CORPORATIONS

12/20/10--01036--013 \*\*43.75

Amend CC Marul Chs

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: YOU	THLAND ACADEMY OF D	DAVIE INC
DOCUMENT NUMB	ER:	P10000064233	
The enclosed Articles	of Amendment and fee a	are submitted for filing.	
Please return all corres	pondence concerning th	is matter to the following:	
		MARIA E DIAZ	
	,	Name of Contact Person	
	YOUTHLANI	D ACADEMY OF DAVIE, INC.	
		Firm/ Company	
	13750	WEST STATE ROAD 84	
		Address	
		DAVIE, FL 33325	
	C	City/ State and Zip Code	
	CEIWI E-mail address: (to be use	EI@GMAIL.COM ad for future annual report notification)	
For further information	concerning this matter,	please call:	
MAF	RIA E DIAZ	at ( <u>954</u> ) 64  Area Code & Daytime Tele	13-7354
Name of Co	ontact Person	Area Code & Daytime Tele	ephone Number
Enclosed is a check for	the following amount n	nade payable to the Florida Depart	ment of State:
□\$35 Filing Fee [	\$43.75 Filing Fee & Certificate of Status		☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addre Amendment Sec Division of Cor P.O. Box 6327	ction porations	Street Address Amendment Section Division of Corporations Clifton Building	·
Tallahassee, FL 32314		2661 Executive Center Circle	e

Tallahassee, FL 32301



RECEIVED

10 DEC 30 AM 8: 32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

December 22, 2010

MARIA E. DIAZ YOUTHLAND ACADEMY OF DAVIE,INC. 13750 WEST STATE ROAD 84 DAVIE, FL 33325

SUBJECT: YOUTHLAND ACADEMY OF DAVIE INC

Ref. Number: P10000064233

We have received your document for YOUTHLAND ACADEMY OF DAVIE INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 410A00029590

#### Articles of Amendment to Articles of Incorporation of

### YOUTHLAND ACADEMY OF DAVIE INC

(Name of Corporation as currently filed	d with the Florida Dept	t. of State)	
P10000064	4233		
(Document Number of Co	orporation (if known)		
Pursuant to the provisions of section 607.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this Florida	Profit Corporation ad	opts the following
A. If amending name, enter the new name of the corp	ooration:		
YOUTHLAND ACADEM	Y OF DAVIE, INC.		The new
name must be distinguishable and contain the word abbreviation "Corp.," "Inc.," or Co.," or the designati name must contain the word "chartered," "professional	ion "Corp," "Inc," or '	"Co". A professional	ted" or the corporation
B. Enter new principal office address, if applicable:		T STATE ROAD 84	
(Principal office address <u>MUST BE A STREET ADDR</u>	ESS) DAVIE, FL 3	3325	JO C
			FILEC 3C
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13750 WEST	STATE ROAD 84	FILED STATENTSECRETARY OF STATENT OF CORPORATION OF CORPORATION
	DAVIE, FL 33	3325	AT CNS
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		da, enter the name of	the
Name of New Registered Agent:		<u></u>	
New Registered Office Address:	(Florida street address	<u></u>	
<b>W</b> # <b>3</b>		•	
	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing Registe	arad Agants		
I hereby accept the appointment as registered agent. I a		ept the obligations of th	he position.
Signature o	of New Registered Agent	t, 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<del></del>			
			☐ Add ☐ Remove
E. <u>If amer</u> (a <i>ttach</i> d	nding or adding additional Ar additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)	
			·
			· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·	·· <del>···</del> ···		
F. <u>Ifan a</u> provis	mendment provides for an ex	change, reclassification, or cancellatendent if not contained in the ame	ion of issued shares,
	not applicable, indicate N/A)		
·			

The date of each amendment	(s) adoption: 12/15/2010
Effective date if applicable:	(date of adoption is required)
Enecuve date <u>ii appicable</u> .	(no more than 90 days after amendment file date)
Adoption:of:Amendment(s)	(CHECK ONE)
The amendment(s) was/web by the shareholders was/web	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statemen d for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	MARIA E DIAZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)