## N96000004318

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: ILEARNING FOUNDATION, INC.				
DOCUMENT NUMBER: N9600004318				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Jennifer L. Hughs				
(Name of Contact Person)				
ILEARNING Foundation INC				
377 County Road 309				
Satsuma, FL 32189 (City/State and Zip Code)				
Netpayanadata & G Mail-Com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Sennifer Hughs at (386) 244-8017 (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 \$\bigcup \\$43.75 Filing Fee & \bigcup \\$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed)  \$\bigcup \\$35 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment Section				

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **Articles of Amendment**

to

Articles of Incorporation of

ILRARNING Foundation	n, Inc	
(Name of Corporation as currently	filed with the Florida Dept. of State	)
N96000004318		
(Document Number of Corpor	ation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute following amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profit Corpor</i>	ration adopts the
A. If amending name, enter the new name of the corporate NIA	ion:	
The new name must be distinguishable and contain the word '"Corp." or "Inc." "Company" or "Co." may not be used in		he abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NJA	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		e of the
Name of New Registered Agent:	I/A	
New Registered Office Address:	(Florida street address)	
	(City), Florida	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan	Agent: niliar with and accept the obligations	of the position.
N	A	4 m
Signature of New Regist	ered Agent, if changing	
Page 1	l of 4	

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	<u>Name</u>		Address
1) <u>P</u>	HOSTEN, JORKY	_	Post office BOX 458 We Lake, FL 32193-0458
2)	Lindberg, Frances	<u>&gt;</u>	106 Hudson DRIVE.
<u>3) S</u>	Hughs, Jennifer 1	<u></u>	Post office Box 252 Satsuma, FL 32189
4)		····	
5)		<b></b>	
6)		<del></del>	
<u>If REMOVI</u>	NG an officer and/or director, please list the	title(s) an	d name of the officer/director to be removed:
Title(s)	Name	Title(s)	<u>Name</u>
1)Sec	Valerie B. Hughs	4)	
2)		5)	1

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

The,date of each amendment(s) adoption:	11/30/2011			
Effective date if applicable: AT Once				
(no n	more than 90 days after amendment file date)			
Adoption of Amendment(s) (CH	HECK ONE)			
☐ The amendment(s) was/were adopted by the was/were sufficient for approval.	he members and the number of votes cast for the amendment(s)			
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 11/30/2011				
Signature Valeni Boliah				
(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)				
Valerie B. Hughs				
(Typed or printed name of person signing)				
DECKELARY				
(Title of person signing)				

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