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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PINELLAS ACADEMY	of Nutrition and Dietetics, Inc
DOCUMENT NUMBER: N97000054	05
The enclosed Articles of Amendment and fee are submitted for filing	ng.
Please return all correspondence concerning this matter to the follo	wing:
Alana Benito	ontact Person)
Suncoast Academy of	Nutrition and Dietetics
51 Turnstone	Dr dress)
Safety Harbo	or FL 34695 and Zip Code)
Alana. Benito @ E-mail address: (to be used for future an	9 Mail. (om
For further information concerning this matter, please call:	
Alana Benito	at 860 - 944 - 0232 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the I	·
■ \$35 Filing Fee ■ \$43.75 Filing Fee & □\$43.75 Fil Certificate of Status Certified (Additional enclosed)	Copy Certificate of Status Il copy is Certified Copy
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
	Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Pinella Academy of	Nut	n tion	and	Die	etics	In	<u></u>
(Name of Corporation	as current	ly filed wit	h the Florida	Dept. of St	ate)		
N97000	200	405					
(Docum	ent Numbe	r of Corpor	ation (if know	n)	-		
Pursuant to the provisions of section 617,1006, Flori amendment(s) to its Articles of Incorporation:	da Statutes	s, this <i>Flori</i>	da Not For Pr	ofit Corpoi	ration adopts	the follo	wing
A. If amending name, enter the new name of the	corporatio	<u>)n:</u>					
SUNCOAST ACADEMY of name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	"corporati	ntier on" or "in	and corporated of	Diete r the abbre	till, Inviation "Corp	<u>^C.</u> The o." or "I	new nc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL		<u>~</u>	1A		***		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>OX</u>)		curnsto Cty Ha			346	_ _ 95
D. If amending the registered agent and/or regist new registered agent and/or the new registere			n Florida, ente	er the nam	e of the		
Name of New Registered Agent:) A					
- -		<u> </u>	(Florida	street addres	s) <u>-</u>	······	
New Registered Office Address:	NI	A					4
-		(City)	<u></u>		Florida		<u> </u>
New Registered Agent's Signature, if changing Re	agistared !	\ aant:			Į.		3 [
I hereby accept the appointment as registered agent.	. I am fan	iliar with a	nd accept the	obligations	of the position	<u>g</u> .	<u> </u>
			_		, 2		?: 3)
	Six	nature of N	lew Registerea	Agent, if c	hanging		

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 = ChiefExecutive 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 X Remove X Add	<u>V</u> <u>Mik</u>	<u>Doe</u> e Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
I)Change	Past P	Melissa Cooper	PO BOX 0450
Add			Bay Pines, FL 33794-
X Remove			0050
2) Change	P	Linda Siesel	PO Box OUSO
Add			Bay Pines, FL 3744- 0650
Remove			0650
3) X Change		Nixi Grossi	3343 Jadewood Circle
Add			Tarpon Springs, FL 34688
Remove			
4) Change		Corry Talbot	1740 Prospect St.
_ X _ Add		J	Sarasota, FL 34239
Remove			
5) Change	P	Dustin Lawhorne	6405 N 19th St
★ Add			Tampa, FL 33610
Remove			
(Change			
6) Change			
Add			
Remove			

If amending or adding a (attach additional sheets,							
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	date of each amendment(s) adoption: O(tober 25, 2017 this document was signed.	, if other than the
Effe	ctive date if applicable: OCTOBLY 25, 2017 (no more than 90 days after amendment file date)	
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ument's effective date on the Department of State's records.	listed as the
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	
ø	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 November 15, 2017	
	Signature Coy A Tour (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)	
	Corey A Talbot (Typed or printed name of person signing)	
	Secretary, Suncoast Academy of M (Title of person signing) and Diete	trition