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COVER LETTER

TO: Amendment Section Division of Corporations

SAINT LEO UN NAME OF CORPORATION:	NIVERSITY INCORPOR	RATED		
708865 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are	submitted for filing.			
Please return all correspondence concerning this	matter to the following:			
Vincenza Shaw				
	(Name of Contact F	³erson)		
Saint Leo University - Business Affairs				
•	(Firm/ Compan	ıy)		
33701 Sate Road 52, MC 2246				
	(Address)			<u> </u>
St. Leo, Florida 33574				
	(City/ State and Zip	(Code)		
Vincenza.Shaw@saintleo.edu				
E-mail address: (to be	used for future annual re	eport notificatio	n)	
For further information concerning this matter, p	lease call:			2022 T
Miranda K. Martinez	a	352 it	588-8311	2022 \$517
(Name of Contact Pe	rson)	(Area Code)	(Daytime Teleph	one Number 5
Enclosed is a check for the following amount ma	de payable to the Florida	Department of	State:].
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Sta	_	is Certif (Addi	0 Filing Fee ficate of Status fied Copy itional Copy is osed)	3: 2h

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

SAINT LEO UNIVERSITY INCORPORATED

oflowing
The new
"Inc."
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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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	v,cfo,	NISBET, JOHN	33701 SR 52 ST, LEO, FL 33574
Remove			
2) Change Add	V, CFO.	DeTuccio, James	33701 SR 52, MC 2246 ST. LEO, FL 33574
Remove 3) Remove Add Remove	<u>h</u>	SENESE, JEFFREY, Dr.	PO BOX 6665 ST. LEO, FL 33574
4) Change Add	Presiden	Dadez, Edward	P.O. Box 6665, MC 2187 St. Leo, FL 33574
Remove 5) Change Add			
Remove 6)ChangeAddRemove			
		i <u>cles, enter change(s) here</u> : (Be specific)	

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The date of each amendment(s) adoption date this document was signed.	n:				_, if other than the
Effective date <u>if applicable</u> :	(no more than 90 a	knownikan amanaka	ant file dates		
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<u>Note:</u> 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 9/15/22
Signature Japas Atrica
(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)
James DeTuccio
(Typed or printed name of person signing)
Vice President of Business Affairs and CFO

(Title of person signing)