706344

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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07/19/2021 Amend.

2021 JUL 12 AT 3: 57



NECEIVED
2021 JUL 12 PM 5:43

June 23, 2021

LIDIA VALLI 15701 NW 37 AVE MIAMI GARDENS, FL 33054 US

SUBJECT: MARIAN CENTER SCHOOL AND SERVICES, INC.

Ref. Number: 706344

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

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) 245-6050.

Jasmine N Horne Regulatory Specialist II

Letter Number: 121A00014306

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, Fl. 32314

NAME OF CORPORATION: Marian Center	School and	Serv:	ices, Inc.
DOCUMENT NUMBER: 706344			
The enclosed Articles of Amendment and fee are submitted	for filing.		
Please return all correspondence concerning this matter to t	he following:		
Sister Lidia			
(Nan	ne of Contact Person)		
(Firm/ Company)		
15701 NW 37	Ave.		
	(Address)		
Miami Garden			
(City	/ State and Zip Code)		
lidia.valli@r E-mail address: (to be used for f	mariancenter	schoo	ol.org
For further information concerning this matter, please call:			
Sister Lidia Valli	at	(305)	200-8927 (Daytime Telephone Number)
(Name of Contact Person)			•
Enclosed is a check for the following amount made payable	to the Florida Depar	tment of S	State:
(A	3.75 Filing Fee & rtified Copy dditional copy is closed)	Certific Certific	Filing Fee rate of Status ed Copy lonal Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Division	nent Section of Corpo	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

EH GO

2021 JUL 12 MM 3:57

Marian Center School and Sc	ervice	s, Inc.	STOR	G TABLE OF STATE
Name of Corporation as currently filed with the I	Florida Dep	ot, of State)	141 -	HARRING TO STREET
706344	_			
(Document)	nt Number (of Corporation (i	f known)	
Pursuant to the provisions of section 617,1006, Florid amendment(s) to its Articles of Incorporation:	da Statutes,	this <i>Florida Not</i>	Før Profit Corp	oration adopts the following
A. If amending name, enter the new name of the c	<u>corporation</u>	<u>ı:</u>		
N/A				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.	'corporation	n" or "incorpora	ited" or the abhi	reviation "Corp." or "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD	le: DDRESS)	N/A	30000000 <u></u>	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>ox</u>) _	N/A		
D. If amending the registered agent and/or registonew registered agent and/or the new registered			da, enter the na	me of the
Name of New Registered Agent:	N/A			
New Registered Office Address:			(Florida street addi	es ()
_	N/A			_, Florida
		(City)		_, Florida (Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	e <mark>gistered As</mark> I am famil	gent: liar with and acc	ept the obligation	ns of the position.
	Sign	ature of New Rey	gistered Agent, 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)

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: X Change X Remove X Add	$\overline{\mathbf{V}}$	John Doc Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	T	Sean Clancy	211 Bal Cross Dr. Bal Harbour, FL 33154
X Remove 2) Change Add	<u>T</u>	David Long	80 Terracina Ave. Golden Beach, FL 33160
Remove 3) Remove Add Remove			
4) Change Add			
Remove 5) Change Add Remove			
6) Change\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.			
E. If amending or add (attach additional she		nal Articles, enter change(s) here: sary). (Be specific)	

·	
	
	
The date of each amendment(s) adoption: 5/03/2021	_, if other than the
date this document was signed.	
Effective date if applicable:	
(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 document's effective date on the Department of State's records.	oe listed as the
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.	

Dated _	7/9/2021
Signature	Sister Lidia Valli
(E	By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Sister Lidia Valli
	(Typed or printed name of person signing)

(Title of person signing)