755390

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to		
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Amendicus

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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION	The DePaul School o	of Northeast Florida,	Inc.	
i	¥755390			
DOCUMENT NUMBER:				
The enclosed Articles of Am	endment and fee are sub	mitted for filing.		
Please return all corresponde	nce concerning this matt	er to the following:		
Charlotte M. Parker (Office	Manager)			
		(Name of Contact P	erson)	
DePaul School of Northeast	Florida			
		(Firm/ Compan	y)	
3044 San Pablo Road S.				
		(Address)		
Jacksonville, FL 32224				
	-	(City/ State and Zip	Code)	<u> </u>
parkerc@depaulschool.com				
E	mail address: (to be used	for future annual rep	port notification	n)
For further information conc	erning this matter, please	call:		
Charlotte Parker		at	904	223-3391
	Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pa	yable to the Florida	Department of	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	O Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing A	ddress		reet Address	
Amendmer Division of	it Section Cornorations		nendment Sect	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

The DePaul School of Northeast Florida, Inc.		
(Name of Corporation as currently filed with the Flo	rida Dept. of State)	
#755390		
(Document I	Number of Corporation (if ki	nown)
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	rporation" or "incorporated	l" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDR</u>	<u>(E33</u>)	20
C. Enter new mailing address, if applicable:		1.
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	-i, 8:110: 00
		<u>ن</u>
D. If amending the registered agent and/or registere	d office address in Florida,	enter the name of the
new registered agent and/or the new registered of	ffice address:	
Name of New Registered Agent:		
	(FI	orida street address)
New Registered Office Address:		
		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I		the obligations of the position.
	Signature of New Registe	ered 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	PT John De V Mike Je SV Sally Sr	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
l) Change Add	<u>S</u>	Allen Skinner	4469 Ortega Forest Drive Jacksonville, FL 32210
x Remove			
2) Change Add	_ <u>D</u>	Regina Littlejohn	6325 Ian Chad Drive West Jacksonville, FL 32244
X Remove 3) Change Add X Remove	<u>D</u>	Gregory Hieb	8580 Hunters Creek Drive North Jacksonville, FL 32256
4) Change Add	D	Rosanna Hamrick	7681 Sentry Oak Circle W Jacksonville, FL 32256
x Remove			
5) Change Add	<u>D</u>	Dr. Christine Thorogood-Schmitt	916 East Pleasant Place Saint Johns, Florida 32259
x Remove			
6) Change Add	_D	Christie Guerrero	9191 R.G. Skinner Pkwy Suite 703
× Remove			Jacksonville, FL 32256
E. If amending or addin (attach additional sheet	g additional Artics, if necessary).	cles, enter change(s) here: (Be specific)	
Please ADD the following	new board memb	pers to the article. Please see the attached nev	w Board of Directors Directory.
Jov Bardin (Director) - 15	29 3rd Street Sout	th, Jacksonville Beach, FL 32250	
Nancy Barnard (Director)	- 4440 Merrimac	Avenue, Jacksonville, FL 32210	
Rosy Culpepper (Director) - 12381 Pleasant	Park Drive North, Jacksonville, FL 32225	
	•	Blvd., Ponte Vedra Beach, FL 32082	

the date of each amendment(s) adoption:	• • •				
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Sote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the	Effective date if applicable:				
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(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.

Adoption of Amendment(s)

June 6, 2020	
Dated	11 11 11 11
Signature	Amber d. Oliveira
have not been	an or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)
	Amber K. Oliveira

(Title of person signing)