759111

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	RPORATION: Junior Achiev	ement of the Palm Be	aches, Incorporated
DOCUMENT I	NUMBER: 759111		
The enclosed A	ticles of Amendment and fee are sul	omitted for filing.	
Please return all	correspondence concerning this mat	ter to the following:	
-		ia Kirk Barto	· · · ·
	(Name of	Contact Person)	
_	Junior Achievement of the	ne Palm Beaches, Incorp	orated
	(Firm	n/ Company)	
-	6903 Vista Par	kway North, Suite 10	
	(,	Address)	
_	West Palm Be	ach, FL 33411-2728	
	(City/ Sta	te and Zip Code)	
_		orAchievement.com d for future annual report noti	fication)
For further infor	mation concerning this matter, pleas	e call:	
Claudia Kirk I	Barto	at (561) 242 9	468
(1)	Name of Contact Person)	(Area Code & Da	ytime Telephone Number)
Enclosed is a ch	eck for the following amount made p	ayable to the Florida Departm	ent of State:
□\$35 Filing Fe	Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
·	Mailing Address Amendment Section	Street Address Amendment Sectio	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 Executive Ce Tallahassee, FL 32	

Articles of Amendment Articles of Incorporation

Junior Achievement of the Palm Beaches, Incorporated (Name of Corporation as currently filed with the Florida Dept. of State)

759111 (Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

Junior Achievement of the	Palm Beaches &	Treasure Coast, I	Inc.
The new name must be distinguishable and abbreviation "Corp." or "Inc." "Company"			orporated" or the
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE			
 C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF) D. If amending the registered agent and/or new registered agent and/or the new reg 	TCE BOX)		SECULA ARY OF STATE ALLAHASSEE, FLORIDA er the name of the
Name of New Registered Agent:	Claudia	Kirk Barto	_
New Registered Office Address:		way North, Ste 10	<u>0</u>
		Im Beach	, Florida 33411 (Zip Code)
New Registered Agent's Signature, if chang I hereby accept the appointment as registere position.		iliar with and accep	t the obligations of the

Page 1 of 3

If amending the Officer's 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
CE	Michael Percy	6750 N Andrew Avenue, # 200 Fort Lauderdale, FL 33309	✓ Add ☐ Remove
<u>T</u>	Glenn Schanel	4600 Military Trail, #215	☑ Add ☐ Remove
			☐ Add ☐ Remove
E. If amend (attach ad	ling or adding additional Article Iditional sheets, if necessary). (I	s, enter change(s) here: Be specific)	

		,	

The date of each amendment(s) a	doption: August 18, 2011 and September 15, 2011
`,	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ac was/were sufficient for approva	lopted by the members and the number of votes cast for the amendment(s) l.
There are no members or mem adopted by the board of directo	bers entitled to vote on the amendment(s). The amendment(s) was/were rs.
have no	chairman or vice chairman of the board, president or other officer-if directors t been selected, by an incorporator – if in the hands of a receiver, trustee, or urt appointed fiduciary by that fiduciary)
_	Claudia Kirk Barto
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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