N00000003581

(Re	questor's Name)	
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☐ PICK-UP	☐ WAIT	MAIL
	siness Entity Name)	<u> </u>
(00	omess Entry Name,	
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Certified Copies	_ Certificates of	Status
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Special Instructions to	Filing Officer:	
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C. GOLDEN APR 1 8 2019

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	CED LEARNING INC
N00000003581 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing	
Please return all correspondence concerning this matter to the following	 ng:
KIYATA N. BRANKER	
(Name of Cont	tact Person)
CITYGATE SCHOOL OF ADVANCED LEARNING INC	I
(Firm/ Co	inpany)
16400 NW 15 AVE	
(Addre	ess)
MIAMI, FL 33169	
(City/ State and	d Zip Code)
MSKBRANKER@GMAIL.COM	
E-mail address: (to be used for future annu	pal report notification)
For further information concerning this matter, please call:	
KIYATA N. BRANKER	786 802-3240
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Flo	i orida Department of State:
S35 Filing Fee S43.75 Filing Fee S43.75 Filing Certificate of Status Certified Company (Additional Cenclosed)	py Certificate of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to | Articles of Incorporation of |

FILED

2019 APR 11 AM 9: 02

CITYGATE SCHOOL OF ADVANCED LEARNING I	INC ¦	TWO IT AF
(Name of Corporation as cu	rrently filed with the F	lorida Dept. of State)
N00000003581		The state of the s
(Document N	Sumber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:		For Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	
CITY INNOVATION SCHOOL INC		The new
name must be distinguishable and contain the word "cor, "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable:	poration" or "incorpor	ated or the abbreviation "Corp." or "Inc.
(Principal office address MUST BE A STREET ADDRE	ESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered		ida, enter the name of the
new registered agent and/or the new registered of	lice address:	
Name of New Registered Agent:		
New Registered Office Address:		(Florida street address)
		M: J -
	(City)	, Florida (Zip Code)
	1	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I describe the appointment of the second se	tered Agent: am familiar with and acc	cept the obligations of the position.
	į	
	Signature of New Re	egistered Agent, if changing
	, -	

address of each Office (Attach additional sheet Please note the officer/a P = President; V = Vice	r and/or 1 s. if neces lirector tit President = Chief I	Director being added: sary) tle by the first letter of the office t; T= Treasurer; S= Secretary; t inancial Officer. If an officer/a	name of each officer/director being to title:	nan or Clerk: CEO = Chief
Changes should be note a change, Mike Jones le Mike Jones, V as Remov	aves the c	orporation, Sally Smith is name	n Doe is listed as the PST and Mike Jo d the V and S. These should be noted a	nes is listed as the V. There is s John Doe, PT as a Change,
Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change Add Remove				
2) Change Add				
Remove 3) Change Add				
Remove 4) Change Add	~			
Remove 5) Change				
Add Remove				
6) Change Add Remove				

amending or adding additional Article tach additional sheets, if necessary).	(Be specific)				
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The date of each amendment(s) adoptate this document was signed.	otion:	, if other than the
ffective date <u>if applicable</u> :		
	(no more than 90 days af	ier amendment file date)
Note: If the date inserted in this block locument's effective date on the Depa		statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop was/were sufficient for approval.	oted by the members and the r	number of votes cast for the amendment(s)
There are no members or member adopted by the board of directors		dment(s). The amendment(s) was/were
Dated APRIL 7, 201	9	
Signature		ard, president or other officer-if directors
have not been		- if in the hands of a receiver, trustee, or
KIYATA	N. BRANKER	
	(Typed or printed	d name of person signing)
	Sec	retary
	(Title	e of person signing)