# N0200000041

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### **COVER LETTER**

TO: Amendment Section
Division of Corporations

### BETTER DAYS ACADEMY, INC.

NAME OF CORPORATION:	
DOCUMENT NUMBER: 922/	400004369 N0200000041
The enclosed Articles of Amendment and fee a	re submitted for filing.
Please return all correspondence concerning thi	s matter to the following:
BETTER DAYS AC	(Name of Contact Person) CADEMY, INC.
	(Firm/ Company)
3426 Pipe	s o the Glen way
GYLA	City/ State and Zip Code)
Mr. dorsey	be used for future annual report notification)
For further information concerning this matter,	, please call:
LARRY W DURS	Person) at 407 595 6764  (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount i	made payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing I Certificate of \$	
Mailing Address	Street Address

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

## FILED

2022 MAR 10 PM 12: 26

BETTER DAYS ACADEMY, INC.		SECRETARY OF STATE
Name of Corporation as currently filed with the Florida Do	ept. of State)	TALLAHASSEE, FI
8 <del>22 A 0 00 O</del>	4369	N02000000041
(Document Numbe	r of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not F</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	on:	
- NA		The new
name must be distinguishable and contain the word "corporati" "Company" or "Co." may not be used in the name.	on" or "incorporate	ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		'[A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ν	[A
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office as	e address in Florid	la, enter the name of the
<del></del>		. [ ]
Name of New Registered Agent:		
New Registered Office Address:		(Florida street address)
		, Florida
	(City)	, Florida (Zip Code)
and the state of t	Agant:	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far	<u>Agent.</u> miliar with and acce	pt the obligations of the position.
Thereta, accept the appearance of the San		
		_

Signature of New Registered 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		Doc Jones Smith	
Type of Action (Check One)	Title	Name	Address
1)Change Add	CEO	LAPRY W. DORSEY	ortendo, FL 3CSUS
Remove  Change Add	<u>p</u>	Michael J DAVIS	P.D. BOX 114 CLANG CONX, FL 3271D
Pemove 3) Change Add Remove	<u>vp</u>	Anthony McClendon	Ira Callowy  1746 Blossom wood Lu  Orlando FLA 32868  EARL BARNETTE
4) Change Add	_\$	wonds Horris	4653 Staghorn Dr #220 01/1400, PC 32808
Remove  5) Change Add	T	Donna-Daniels Davis	starlethy Foster 7462 Croked LNCIT orlando, FLA 32818
Remove 6) Change Add			Micheltuge Bretrand
E. If amending or ad (attach additional s	lding additional heets, if necessar	Articles, enter change(s) here: y). (Be specific)	
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The date of each amendment(s) adoption	n:	NA NA		if other than the
date this document was signed.		41 TA		
Effective date <u>if applicable</u> :		N   IT s after amendment file da		
Note: If the date inserted in this block do document's effective date on the Departm	es not meet the application of State's records.	ible statutory filing requi	rements, this date will no	t be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopted was/were sufficient for approval.	d by the members and	the number of votes cast	for the amendment(s)	

Dated	1/22/2022
Signat	(By the chairman or vice chairman of the loard, 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)
	(Typed or printed name of person signing)