

NO2000005644

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(Address)

(City/State/Zip/Phone #)

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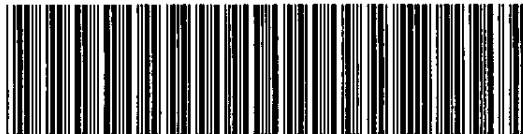
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FL 32310

8/10/16

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Florida Learning Alliance, Inc.

DOCUMENT NUMBER: N02000005644

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dr. Debra Elliott

(Name of Contact Person)

Heartland Educational Consortium

(Firm/ Company)

1096 Highway 27 North

(Address)

Lake Placid, Florida 33852

(City/ State and Zip Code)

debra.elliott@heartlanded.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dr. Debra Elliott

863

531-0444

at

(Name of Contact Person)

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|--|--|---|---|

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

Florida Learning Alliance, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N02000005644

(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:

A. If amending name, enter the new name of the corporation:

NA

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

c/o Florida Learning Alliance, Inc.

3841 Reid Street

Palatka, Florida 32177

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

c/o Florida Learning Alliance, Inc.

3841 Reid Street

Palatka, Florida 32177

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Dr. Debra Elliott

1096 Highway 27 North

(Florida street address)

New Registered Office Address:

Lake Placid

(City)

Florida 33852

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Dr. Debra Elliott

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>D</u>	<u>Dr. Frank Gibbs</u>	<u>1096 Highway 27 North</u>
<input type="checkbox"/> Add			<u>Lake Placid, FL 33852</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>PD</u>	<u>Dr. Debra Elliott</u>	<u>1096 Highway 27 North</u>
<input checked="" type="checkbox"/> Add			<u>Lake Placid, FL 33852</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>D</u>	<u>Mr. Robert E. Smith</u>	<u>3841 Reid Street</u>
<input type="checkbox"/> Add			<u>Palatka, Florida 32177</u>
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>TD</u>	<u>Dr. Patrick Wnek</u>	<u>3841 Reid Street</u>
<input checked="" type="checkbox"/> Add			<u>Palatka, Florida 32177</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change	<u>D</u>	<u>Ms. Paula Waller</u>	<u>753 West Blvd.</u>
<input type="checkbox"/> Add			<u>Chipley, Florida 32428</u>
<input checked="" type="checkbox"/> Remove			
6) <input type="checkbox"/> Change	<u>D</u>	<u>Mr. John Selover</u>	<u>753 West Blvd.</u>
<input checked="" type="checkbox"/> Add			<u>Chipley, Florida 32428</u>
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Amending Article III - Purpose as follows:

1. The purpose of the corporation is to support increasing academic achievement primarily for students in small and rural districts through the identification, development, or acquisition of products, services and/or strategies. These products, services or strategies may include, but are not limited to, curriculum, instruction, assessment, student and community services, and staff development ~~that have a technology-based component~~. Proceeds from sales of products, services, or strategies developed by, or on behalf of, the corporation will be reinvested in technology, staff development and any other purpose that supports increasing academic achievement. The corporation will engage in fundraising activities in order to provide additional resources such as equipment and internet connections to the small and rural school districts that make up the corporation's primary client base.

The date of each amendment(s) adoption: June 8, 2016, 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 listed as the document's effective date on the Department of State's records.

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.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 7-25-2016

Signature Dr. Debra Elliott

(By the chairman or vice chairman of the board, 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)

Dr. Debra Elliott

(Typed or printed name of person signing)

President/Director

(Title of person signing)