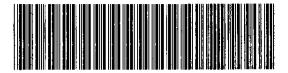
## 

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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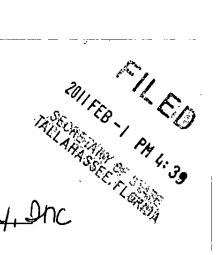
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Tri-County Ap	prentice	ship Acad	emy, Inc.	
DOCUMENT NUME	N0300001696		· · · · · · · · · · · · · · · · · · ·		
The enclosed Articles	of Amendment and fee are sub	mitted fo	r filing.		
Please return all corres	pondence concerning this mat	ter to the	following:		
	Christin	ne Rodri	guez		
	(Name of	Contact I	Person)	_	<del></del>
	(Firm	/ Compar	ıy)		<del></del>
***************************************	13830 Jetport Cor		Parkway,	Ste. 5	
	(/	Address)			
	Fort Myer (City/ Star				
	crodrigu	ıez@tca:	afl.com		
	E-mail address: (to be use	d for futu	re annual re	port notificat	ion)
For further information	concerning this matter, please	e call:			
Christ	ine Rodriguez	at (_	239	225-099	5
(Name o	f Contact Person)		(Area Coo	le & Daytime	e Telephone Number)
Enclosed is a check for	the following amount made p	ayable to	the Florida	Department of	of State:
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	Certif	3.75 Filing lied Copy tional copy sed)		☐ \$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			Division o Clifton Bu	nt Section of Corporation	s

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



Tri-County (Name of Corporation	ADDY	conticesh	ai	Academy	. Onc
(Name of Corporation	as current	ly filed with the I	Florid	la Dept. of State)	
NA3	<u> የ</u>	11010			

(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:

e new name must be distinguishable and conto breviation "Corp." or "Inc." <u>"Company" or "</u>	ain the word "corporation" or "it Co," may not be used in the name.	ncorporated" or the
Enter new principal office address, if applica rincipal office address <u>MUST BE A STREET A</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i> )	
If amending the registered agent and/or reginew registered agent and/or the new register  Name of New Registered Agent:		nter the name of th
·····		nter the name of th
new registered agent and/or the new register  Name of New Registered Agent:	ed office address:	nter the name of the

## If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and litle, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	Name	<u>Address</u>	Type of Action
<del></del>	<del></del>		
E. If amend	ling or adding additional Articl iditional sheets, if necessary).	es, enter change(s) here: (Be specific)	
			······································
	Anna anna anna anna anna anna anna anna		
<del> </del>			

The date of each amendment(s) adopt	tion: /- 36-//
Effective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
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)
There are no members or members e adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were
Dated	6/201/
/have not been	man or vice chairman of the board, president or other officer-if directors n selected, by an incorporator – if in the hands of a receiver, trustee, or ppointed fiduciary by that fiduciary)
	James Roberts
<del></del>	(Typed or printed name of person signing)
	Vice Chairman
	(Title of person signing)

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