

NO30000002152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

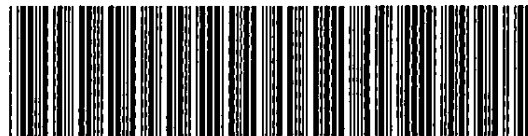
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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FILED
13 MAY 16 PM 1:51
TALLAHASSEE, FLORIDA

FILED
13 MAY 16 PM 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend/MC
5-17-13

*02250, 01169, 00707, 00672



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 652233 131879A

AUTHORIZATION :

COST LIMIT : \$ 43,75

[Handwritten signature]

ORDER DATE : May 16, 2013

ORDER TIME : 11:04 AM

ORDER NO. : 652233-005

CUSTOMER NO: 131879A

DOMESTIC AMENDMENT FILING

NAME: SOMERSET ACADEMY HIGH SCHOOL
INC.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap -- EXT# 52951

EXAMINER'S INITIALS: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

13 MAY 17 AM 10:39

May 16, 2013

CSC

Atten: Carina L. Dunlap
1201 Hays Street
Tallahassee, FL 32301

SUBJECT: SOMERSET ACADEMY HIGH SCHOOL, INC.
Ref. Number: N03000002152

RESUBMIT
Please give original
submission date as file date.

We have received your document for SOMERSET ACADEMY HIGH SCHOOL, INC. and the authorization to debit your account in the amount of \$43.75. However, the document has not been filed and is being returned for the following:

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey
Regulatory Specialist II

Letter Number: 313A00012378

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Somerset Academy High School Inc

DOCUMENT NUMBER: N03000002152

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

Please return all correspondence concerning this matter to the following:

Collette D. Papa, Esq.

(Name of Contact Person)

(Firm/ Company)

6340 Sunset Drive

(Address)

Miami, FL 33143

(City/ State and Zip Code)

cpapa@academica.org

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

For further information concerning this matter, please call:

Collette Papa

(Name of Contact Person)

at 305 669-2906

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

Somerset Academy High School Inc.

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

N03000002152

(Document Number of Corporation (if known))

FILED
13 MAY 16 PM 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Somerset Virtual Academy, Inc.

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. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Corporation Service Company

1201 Hays Street

(Florida street address)

New Registered Office Address:

Tallahassee


(City)

Florida 32301

(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.



Signature of New Registered Agent, if changing

Carina L. Dunlap
Asst. Vice President

(Attach additional sheets, if necessary)

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.

Example:

Type of Action
(Check One)

Name

Address

X Add

Remove

____ Add

Remove

Add

Remove

 Add

Remove

Add

Remove

_____ Add

Remove

[illegible]

The date of each amendment(s) adoption: 1-1-13

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 5-1-13

Signature Andreina Figueroa

(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)

Andreina Figueroa

(Typed or printed name of person signing)

President

(Title of person signing)