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A. Butler 10/7/21

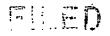
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	TH TECH CHARTER AC	JADEMY, INC.		
N0300000				
DOCUMENT NUMBER:				
The enclosed Articles of Amendment a	and fee are submitted for	filing.		
Please return all correspondence conce	rning this matter to the fo	llowing:		
GINGER DEKALB				
	(Name of	Contact Person)		
SOUTH TECH CHARTER ACADEM	IY, INC.			
	(Firm	n/ Company)		
6161 W WOOLBRIGHT ROAD				
- -	(/	Address)		
BOYNTON BEACH, FL 33437				
	(City/ Sta	te and Zip Code)		
GINGER.DEKALB@PBCHARTERS	CHOOLS.ORG			
E-mail addr	ess: (to be used for future	annual report notifica	tion)	
For further information concerning this	matter, please call:			
GINGER DEKALB		(561) at	364-7973	
(Name of the	Contact Person)	(Area Cod	e) (Daytime Telepho	one Number)
Enclosed is a check for the following a	mount made payable to the	he Florida Department	of State:	
■ \$35 Filing Fee □\$43.75 Certific	cate of Status Certifie	d Copy Ce onal copy is Ce ed) (A	2.50 Filing Fee rtificate of Status rtified Copy dditional Copy is nelosed)	
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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



SOUTH TECH CHARTER ACADEMY, INC.		2021 CEP 27	AH H: 09
Name of Corporation as currently filed with the	Florida Dept. of State)		
N03000006586		S. Maria	OF STATE
(Docun	nent Number of Corporation (if known)	in Lu.	logi.nt
Pursuant to the provisions of section 617,1006, Floamendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida Not For Profit</i>	Corporation adop	ots the following
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		abbreviation "Co	orp." or "Inc."
Company or Co, may not be used in the name	<u>2</u> •		
B. Enter new principal office address, if applica			
(Principal office address <u>MUST BE A STREET A</u>	DDRESS)		
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE)	BOX)		
D. If amending the registered agent and/or regis	tarne affice address in Florida, enter t	he name of the	
new registered agent and/or the new register		ne name or me	
	SOUTH TECH SCHOOLS HOLDINGS	S, LLC	
<u>Name of New Registered Agent:</u>			
	6161 W WOOLBRIGHT ROAD		
New Registered Office Address:	(Florida stre	et address)	
New Registerea Office Audyess.	BOYNTON BEACH	3.3	3437
		, Florida	
	(City)	(Zip Coa	<i>ie)</i>
New Registered Agent's Signature, if changing I	Registered Agent:		
hereby accept the appointment as registered agen	t. I am familiar with and accept the obli	gations of the posi	ition.
	L'aille Land	2	
_	Mula cx ove		
	Mynature of New Registered Age	ent, 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	PT John Do V Mike Jo SV Sally Si	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) × Change Add	<u>VC</u>	NICOLINI, SUZANNE	6161 W WOOLBRIGHT ROAD BOYNTON BEACH FL 33437
Remove 2) * Change	<u>M</u>	KESTEN, ROBERT	6161 W WOOLBRIGHT ROAD
Add			BOYNTON BEACH FL 33437
Remove Change X Add Remove	M	GRENGA, CHRISTINA	6161 W WOOLBRIGHT ROAD BOYNTON BEACH FL 33437
4) × Change Add	<u>C</u>	FELDMAN, RUSSELL	6161 W WOOLBRIGHT ROAD BOYNTON BEACH FL 33437
Remove 5) Change	<u>M</u>	ROBINSON, ANTHONY	6161 W WOOLBRIGHT ROAD BOYNTON BEACH FL 33437
Remove 6) Change			
Add Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
N/A			

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	a 111 21		
The date of each amendment(s) adoption: date this document was signed.	9-14-21	***	_, if other than the
Effective date if applicable:	n 90 days after amendment file date)		
(no more that	a 22 days after amenament for tune)		

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 east for the amendment(s) was/were sufficient for approval.

Dated	9-23	· 21	
Signature		nicali	
have		by an incorporato	poard, president or other officer-if director r – if in the hands of a receiver, trustee, c luciary)
	5.	NICO	LINI
-		(Typed or prin	ted name of person signing)