## N04000009456

| (Red                      | questor's Name)   |                 |
|---------------------------|-------------------|-----------------|
| (Ado                      | dress)            |                 |
| (Add                      | dress)            |                 |
| (City                     | //State/Zip/Phone | <del>= #)</del> |
| PICK-UP                   | ☐ WAIT            | MAIL            |
| ,<br>(Bus                 | siness Entity Nan | ne)             |
| (Doc                      | cument Number)    |                 |
| Certified Copies          | Certificates      | s of Status     |
| Special Instructions to F | Filing Officer:   |                 |
|                           |                   |                 |
|                           |                   |                 |
|                           |                   |                 |
|                           |                   |                 |

Office Use Only



800247747648

05/10/13--01015--021 \*\*52.50

PIVISION OF CORROPATION

NC

MAY 1 4 2013

T. BROWN

## COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Bay Life Academy, Inc. N04000009456 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Chris Pello (Name of Contact Person) (Firm/ Company) 1204 Lenna Ave (Address) Seffner, FI 33584 (City/ State and Zip Code) cpello@livingstoneschools.org E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Chris Pello (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee \$52.50 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certified Copy Certificate of Status Certificate of Status

**Mailing Address** 

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

(Additional copy is

enclosed)

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certified Copy

Enclosed)

(Additional Copy is

## Articles of Amendment to Articles of Incorporation of



| Bay Life Academy, Inc.   |   |   | PH          |
|--|---|---|-------------|
| (Name of Corporation as currently fi   | iled with the Florida Dept. of St                           | tate)                                   |             |
| N04000009456   |   |   |             |
| (Document Nu   | umber of Corporation (if known)                             |   | _           |
| Pursuant to the provisions of section 617.1006 amendment(s) to its Articles of Incorporation:  |   | Not For Profit Corporation adopts the   | e followi   |
| A. If amending name, enter the new name  | of the corporation:   |   |             |
| Livingstone Schools Inc.   |   |   | The ne      |
| name must be distinguishable and contain the<br>"Company" or "Co." may not be used in the      |   | orated" or the abbreviation "Corp."     | or "Inc.    |
| B. Enter new principal office address, if ap<br>Principal office address <u>MUST BE A STRE</u> |   |   | <u></u>     |
|  | -   |   | <del></del> |
| C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF                 |   |   | _           |
|  |   |   | _           |
| D. If amending the registered agent and/or new registered agent and/or the new registered.     |   | orida, enter the name of the            | -           |
| Name of New Registered Agent:  |   |   |             |
| New Registered Office Address:   | (Florida street addr  | ess)                                    |             |
|  |   | , Florida                               |             |
|  | (City)  | (Zip Code)                              |             |
| New Registered Agent's Signature, if chang hereby accept the appointment as registered         | ging Registered Agent:<br>I agent. I am familiar with and a | accept the obligations of the position. |             |
| Signatu  | ure of New Registered Agent, if cl                          | hanging                                 |             |

Page 1 of 4

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 <math>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 | <u>V</u> <u>Mik</u> | n Doe<br>ce Jones<br>ly Smith |                 |
|----------------------------------|---------------------|-------------------------------|-----------------|
| Type of Action<br>(Check One)    | <u>Title</u>        | <u>Name</u>                   | <u>Addres</u> s |
| l) Change                        |                     |                               |                 |
| Add                              |                     |                               |                 |
| Remove                           |                     |                               |                 |
| 2) Change                        |                     |                               |                 |
| Add                              |                     |                               |                 |
| Remove                           |                     |                               |                 |
| 3) Change                        |                     |                               |                 |
| Add                              |                     |                               |                 |
| Remove                           |                     |                               |                 |
|                                  |                     |                               |                 |
| 4) Change                        |                     |                               |                 |
| Add                              |                     |                               |                 |
| Remove                           |                     |                               |                 |
|                                  |                     |                               |                 |
| 5) Change                        |                     |                               |                 |
| Add                              |                     |                               |                 |
| Remove                           |                     |                               |                 |
| 6)Change                         |                     |                               |                 |
| Add                              |                     |                               |                 |
| Remove                           |                     |                               |                 |

| attach additional s | ding additional Artheets, if necessary). | (Be specific) |             |  |             |
|---------------------|--|---------------|-------------|--|-------------|
|                     |  |               |             |  |             |
|                     |  | <del></del>   |             |  |             |
|                     | <del></del> -                            | <del></del>   |             |  |             |
|                     | · ·                                      |               |             |  | 1           |
|                     |  |               |             |  |             |
|                     |  |               |             |  |             |
|                     |  | <del></del>   |             | · · · · · · · · · · · · · · · · · · ·  |             |
|                     | <del></del>                              | <del>,</del>  |             |  | <del></del> |
| <del></del>         | ···-                                     |               |             |  |             |
|                     |  |               |             |  |             |
|                     |  |               | _           |  |             |
|                     |  | ·             |             |  |             |
| <del>,,,</del>      |  |               |             |  |             |
|                     |  |               | <del></del> | · · · · · -                            |             |
|                     |  |               |             | · · · · · · · · · · · · · · · · · · ·  |             |
|                     |  |               |             |  |             |
|                     |  |               |             |  |             |
|                     |  | <u> </u>      | <del></del> |  |             |
| <del></del>         | <del></del>                              | <del></del>   |             |  |             |
|                     |  |               |             | ······································ |             |
|                     |  |               |             |  |             |
|                     |  |               |             |  |             |
|                     |  | <del></del>   |             | <del></del>                            |             |
|                     |  |               |             | ***                                    |             |
|                     |  |               |             |  |             |
|                     |  |               | <u></u>     |  |             |
|                     |  |               |             | <del> </del>                           |             |

| The date of each amendment(s) adoption: May 9, 2013 |  |  |  |
|---|--|--|--|
| Effe  | tive date <u>if applicable</u> :  (no more than 90 days after amendment file date)   |  |  |
| Adoj  | ption 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 May 9, 2913 Signature  |  |  |
|   | (By the chairman or vise 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) |  |  |
|   | Christopher C Pello  |  |  |
|   | (Typed or printed name of person signing)  |  |  |
|   | CEO  |  |  |
|   | (Title of person signing)  |  |  |