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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATI	Livingstone School	s, Inc				
DOCUMENT NUMBER:	N04000009456			****		
The enclosed Articles of Ar	mendment and fee are sul	omitted for filing.				
Please return all correspond	lence concerning this mat	ter to the following:				
Chjris pello						
		(Name of Contact Po	erson)		·- ·	
					21	
		(Firm/ Company	<i>(</i> )			E .
1204 Lenna Ave					2023 HAR 31	1 1 ***********************************
		(Address)			<del></del>	
Seffner Fl 33584					H 9:	1
	- " ""	(City/ State and Zip	Code)		-: a	
cpello@livingstoneschools.	org					
	E-mail address: (to be use	d for future annual rep	ort notificatio	n)		
For further information con-	cerning this matter, please	e call:				
Chris Pello		at	813	4041598		
	(Name of Contact Person	1)	(Area Code)	(Daytime Telep	hone Number)	
Enclosed is a check for the	following amount made p	ayable to the Florida I	Department of	State:		
<b>■ \$35</b> Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certif S Certif	D Filing Fee icate of Status ied Copy tional Copy is used)		
Mailing Address  Amendment Section  Division of Corporations  P.O. Box 6327		An Div	eet Address nendment Sectivision of Corpo e Centre of T	orations		
	e, FL 32314			e Street, Suite 81	10	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Livingstone Schools, Inc		
(Name of Corporation as currently filed with the F	lorida Dept. of State)	-
N04000009456		
(Documen	nt Number of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Floridamendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida Not F</i>	for Profit Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:	
name must be distinguishable and contain the word "c	namoration" on "incompany	The new
"Company" or "Co." may not be used in the name.	corporation or incorporate	a or the appreviation Corp. or Mc.
B. Enter new principal office address, if applicable	<b></b>	
(Principal office address MUST BE A STREET ADI		023 HAR 30
		PS SF
		<u> </u>
C. Enter new mailing address, if applicable:	•••	型: <b>~</b>
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	, 0.
		<del></del>
	<u>-</u>	
D. If amending the registered agent and/or register	red office address in Florida	, enter the name of the
new registered agent and/or the new registered	office address:	
Name of New Registered Agent:		
Now Projectional Office Address	(F	lorida street address)
New Registered Office Address:		
	(Civ.)	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg	istered Agent:	
l hereby accept the appointment as registered agent.	i am jamiliar with and accept	the obligations of the position.
	Signature of New Regist	tered 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange X Remove X Add	PT John I V Mike SV Sally S	Jones		
Type of Action (Check One)	<u>Title</u>	Name	Address 202	
1) Change Add	<u>s</u>	Matthew Pagel	1204 Lenna Ave 1203 HAF 30	- STATES
* Remove .			Seffner Fl 33584	1757
2) × Change Add	<u>s</u>	Montgomery Ross	1204 Lenna Ave m. c	J
Remove 3) Change Add Remove			Seffner FI 33584	-
4) Change Add	•			-
Remove 5) Change Add				- -
Remove 6) Change Add	<del></del>			
Remove	ing additional Ari	ticles, enter change(s) here:	<del>-</del>	
(attach additional she	vets, if necessary).	(Be specific)		

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	<u>.</u>
The date of each amendment(s) adoption: March 27, 2023	, if other than the
date this document was signed.	
Effective date if applicable: April 1, 2023	
(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	late will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amenda was/were sufficient for approval.	ment(s)

. .

Dated 3-27-2073 Signature
(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)
Chris Pello
(Typed or printed name of person signing)
Co- CEO
(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.

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