N040000 10727

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COVER LETTER

Division of Corporations Washburn Academy, Inc NAME OF CORPORATION: _ NO4000010727 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kathy Jackson (Name of Contact Person) Washburn Academy, Inc. (Firm/ Company) 222 South Lincoln Ave. (Address) Clearwater, Florida 33756 (City/ State and Zip Code) washburnacademy@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 727-667-4601 727 Kathy Jackson (Daytime Telephone Number) (Name of Contact Person) (Area Code) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & ■\$52.50 Filing Fee ☐ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

Mailing Address

TO: Amendment Section

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

Washburn Academy, Inc.				
(Name of Corporation as of	currently filed with the Fl	orida Dept. of State)		
NO4000010727				
(Document	Number of Corporation (if	known)		
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not I</i>	For Profit Corporation adop	its the follo	owing
A. If amending name, enter the new name of the cor	poration:			
N/A				e new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporat	ed" or the abbreviation "Co	np." or ".	Inc."
B. Enter new principal office address, if applicable:	N/A			
(Principal office address MUST BE A STREET ADDI	RESS)			
				5.
			<u> </u>	
C. Enter new mailing address, if applicable:	N/A		-	1
(Mailing address <u>MAY BE A POST OFFICE BON</u>	<i></i>		<u> </u>	
			;_	:•
				·
D. If amending the registered agent and/or registere		a, enter the name of the	33	ſ
new registered agent and/or the new registered o				
Name of New Registered Agent:	·			
New Registered Office Address:	•	Florida street address)		
N//	.			
	(City)	, Florida (Zip Coo		
	(C.Hy)	(гар Сос	ie)	
New Registered Agent's Signature, if changing Regis				
I hereby accept the appointment as registered agent. I	am familiar with and accep	of the obligations of the pos.	tton.	
	Signature of New Regi	stered 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 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>	<u>1 Doe</u> <u>e Jones</u> <u>y Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change	Director	Mitchell Smith	805 Dempsey St
Add			Clearwater, FL 33756
X Remove			
2) Change	Director	Yvonne Guevara	1428 Gulf to Bay Blvd, Ste C
X Add			Clearwater, FL 33755
Remove			
3) Change	N/A		
Add			
Remove			·
4) Change	N/A		
Add			
Remove			
51 Change	N/A		
Add			
Remove			
6) Change	N/A		
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
valuen audinomai snevis, ij necessaryi.	(ne specya)		
N/A			
			-
			
	· ·		
	·		
	 		
			
			<u> </u>
		·-	

April 19, 2019	
The date of each amendment(s) adoption:	, if other than
late this document was signed.	
N/A	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	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 east for the amendmen was/were sufficient for approval.	n(s)
☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/wer adopted by the board of directors.	'૯
Dated April 19, 2019	
Signature School Stool	
(By the chairman or vice chairman of the board, president or other officer-if directed have not been selected, by an incorporator — if in the hands of a receiver, trustee, of other court appointed fiduciary by that fiduciary)	
Shawn C Float	
(Typed or printed name of person signing)	_
Director	
(Title of person signing)	_

the