## N06 0000004445

(Requestor's Name)	
(Address)	40034
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	]\$,725.720;
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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Office Use Only



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AUG 2 4 2020 I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: Broward Aca	demy, Inc.	
N06000004445 DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee a	re submitted for filing.	
Please return all correspondence concerning this	is matter to the following:	
Eric Dorsky, Esq.		
	(Name of Contact Per	son)
Eric Dorsky, P.A.		
	(Firm/ Company)	
7320 Griffin Road, Suite 220		
	(Address)	
Davie, FL 33314		
	(City/ State and Zip C	ode)
edorsky@edpalaw.com		
E-mail address: (to b	be used for future annual repo	ort notification)
For further information concerning this matter.	please call:	
Eric Dorsky		(954) 587-11.
(Name of Contact		Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount m	nade payable to the Florida D	epartment of State:
■ \$35 Filing Fee □\$43.75 Filing F Certificate of S		☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section		et Address endment Section
Division of Corporations		sion of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

2023 11 10 11 11 15: 02

August 10, 2020

MARIA PRESTON 575 NE 5TH TERR APT. 441 FORT LAUDERDALE, FL 33301

SUBJECT: BROWARD ACADEMY, INC.

Ref. Number: N06000004445

We have received your document for BROWARD ACADEMY, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please submit/complete the form in its entirety as all the pages were not submitted.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Letter Number: 720A00015044

Irene Albritton Regulatory Specialist II

www.sunbiz.org

## Articles of Amendment to Articles of Incorporation of

200

Broward Academy, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N06000004445 (Document Number of Corporation (if known) 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: DiverseAbilities, Inc. 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 11850 W State Rd 84 Suite 10 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Davie, FL 33325 C. Enter new mailing address, if applicable: 11850 W State Rd 84 Suite 110 (Mailing address MAY BE A POST OFFICE BOX) Davie, Fl. 33323

D. <u>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:</u>

		_ · · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		Florida street address)
		, Florida
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

Name of New Routetored 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

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>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sr	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change Add		-		
Remove				
2) Change Add		_		
Remove 3 ) Remove Add Remove		-		
4) Change Add		_		
Remove				
5) Change Add	··· = -	_		
Remove				
6) Change Add		_		
Remove				
E. If amending or addin (attach additional shee	g additions if nece	onal Arti	cles, enter change(s) here: (Be specific)	
	_			

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Trans 9/5 3/17/1	
The date of each amendment(s) adoption: 5 vn 2 20 2020 if date this document was signed.	other than the
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 will not be list	ited 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 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 8192020 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)
Maria Preston
(Typed or printed name of person signing)
Director
(Title of person signing)