## N06000009611

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(City/State/Zip/Phon	e #)
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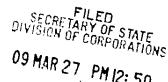
TROBERTS MAR. 3.1 2009)

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Community	Edventures	······································
<b>DOCUMENT NUMBER:</b> <u>N06000009611</u>		· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning t	his matter to the following:	
Stan Klein		
(Name	e of Contact Person)	
Community Edventures		
. (F	Firm/ Company)	
3020 NW 33rd Avenue		
<del>-</del>	(Address)	<del></del> _
Lauderdale Lakes, FL 333		
	State and Zip Code)	
For further information concerning this matter	r, please call:	
Edward W. Miller	at ( 954 ) 343-997	<i>"</i> 2
(Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amount	made payable to the Florida Dep	partment of State:
\$35 Filing Fee \$\sum \text{\$43.75 Filing Fee & Certificate of Status}	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	ircle

## Articles of Amendment to Articles of Incorporation



of	•	03 HAR 27 PM 12: 50
(Name of Corporation as currently filed	Edventures Two	
N06000 (Document Number of Co	009611	
Pursuant to the provisions of section 617.1006, Florida St he following amendment(s) to its Articles of Incorporation		For Profit Corporation adop
A. If amending name, enter the new name of the corp	oration:	
The new name must be distinguishable and contain the abbreviation "Corp." or "Inc." "Company" or "Co." m		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u>	<u>ESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		la, enter the name of the
Name of New Registered Agent:		<del></del>
New Registered Office Address:	(Florida street address)	
<del></del>	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. position.		accept the obligations of the
Signatura	of New Registered Agent	if ahayaiya

	onal sheets, if necessary)		
<u>itle</u>	Name	<u>Address</u>	Type of Action
<del></del>			· _ Add
			Remove
			🗖 Add
			Remove
			🚨 Add
			☐ Remove
educa makin organ	tional, and scienting of distributions tizations under sections	anized exclusively for d fic purposes, including, to organizations that qu ion 501(c)(3) of the Int any future federal tax	for such purpos alify as exempt ernal Revenue Co
Unan	ne or more exempt pu	the organization, assets urposes within the meani Code, or corresponding s ll be distributed to the	ng of section 50

The date of each amendmen	t(s) adoption: $3-23-07$
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) eroval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Signature (By	the chairman or vice chairman of the board, president or other officer-if directors to not been selected, by an incorporator – if in the hands of a receiver, trustee, or
oth	Edward W. Miller  (Typed or printed name of person signing)
	President (Title of person signing)

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see attached revised articles