## N0700000 1224

| (Re                     | equestor's Name)  |             |
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| (Cit                    | ty/State/Zip/Phon | e #)        |
| PICK-UP                 | ☐ WAIT            | MAIL        |
| (Bu                     | siness Entity Na  | me)         |
| (Do                     | ocument Number)   | )           |
| Certified Copies        | _ Certificate     | s of Status |
| Special Instructions to | Filing Officer:   |             |
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R. WHITE
JUL 11 2019





## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION             | Kidz Choice Charter  N:                     | School, INC  |                    |  |
|---------------------------------|---|--|--------------------|--|
| DOCUMENT NUMBER:                | N07000001224                                |  |                    |  |
| The enclosed Articles of Am     | endment and fee are subr                    | nitted for filing.   |                    |  |
| Please return all corresponde   | ence concerning this matte                  | er to the following:   |                    |  |
| Maria Ramirez                   |   |  |                    |  |
|                                 |   | (Name of Contact Perso   | on)                |  |
| Kidz Choice Charter School      | . INC                                       |  |                    |  |
|                                 |   | (Firm/ Company)  |                    | <del></del>  |
| 1800 N Douglas Rd               |   |  |                    |  |
|                                 |   | (Address)  |                    |  |
| Pembroke Pines, FL 33024        |   |  |                    |  |
|                                 |   | (City/ State and Zip Co  | de)                |  |
| mramirez.kccs@yahoo.com         |   |  |                    |  |
| E                               | -mail address: (to be used                  | for future annual report   | notification       | 1)   |
| For further information conc    | erning this matter, please                  | call:  |                    |  |
| Maria Ramirez                   |   |  | 54-404-223         | ſ  |
|                                 | (Name of Contact Person)                    |  |                    | (Daytime Telephone Number)                                 |
| Enclosed is a check for the for | ollowing amount made pa                     | yable to the Florida Dep   | partment of        | State:   |
| □ \$35 Filing Fee               | ■\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | Certifi<br>Certifi | 0 Filing Fee icate of Status icd Copy tional Copy is used) |
| Mailing A                       | ddress                                      | Stree  | t Address          |  |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation



| Kidz Choice Charter School, INC  |                                      | 2010 1111          | . 54.6.55                             |
|--|--------------------------------------|--------------------|---------------------------------------|
| (Name of Corporation as  | s currently filed with the Florida I | Dept. of State)    | <del>F# 3: 35</del>                   |
| N07000001224   |                                      | J. J.F.            | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| (Documer   | nt Number of Corporation (if known   | <del></del>        |                                       |
| Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:  | a Statutes, this Florida Not For Pro | ofit Corporation   | adopts the following                  |
| A. If amending name, enter the new name of the c   | orporation:                          |                    |                                       |
| Kidz Choice School, Inc  |                                      |                    | The new                               |
| name must he distinguishable and contain the word " "Company" or "Co." may not be used in the name.  | corporation" or "incorporated" or    | the abbreviation   |                                       |
| B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADdress of applicable) C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BO | <u>DRESS</u> )                       |                    |                                       |
| D. If amending the registered agent and/or registenew registered agent and/or the new registered  Name of New Registered Agent:  |                                      | r the name of th   | ı <u>e</u>                            |
| <u>New Registered Office Address:</u>  | (Florida                             | street address)    |                                       |
| _  |                                      | , Florid           |                                       |
|  | (City)                               | (Zip               | Code)                                 |
| New Registered Agent's Signature, if changing Registered agent.  I hereby accept the appointment as registered agent.  |                                      | obligations of the | position.                             |
|  | Signature of New Registered          | Agent, if changi   | ng                                    |

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 | PT John Do<br>V Mike Jo<br>SV Sally Sr | ones .      |         |
|-----------------------------------|--|-------------|---------|
| Type of Action<br>(Check One)     | <u>Title</u>                           | <u>Name</u> | Address |
| 1) Change                         |  |             |         |
| Add                               |  |             |         |
| Remove                            |  |             |         |
| 2) Change                         |  |             |         |
| Add                               |  |             |         |
| Remove                            |  |             |         |
| 3 ) Change                        |  |             |         |
| Add                               |  |             |         |
| Remove                            |  |             |         |
| 4) Change                         |  |             |         |
| Add                               |  |             | -       |
| Remove                            |  |             |         |
| 5) Change                         |  |             |         |
| Add                               |  |             |         |
| Remove                            |  |             |         |
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| 6) Change                         |  |             |         |
| Add                               |  |             |         |
| Remove                            |  |             |         |

| attach additional sheets, if necessar | y). (Be specific) | ange(s) here: |          |               |             |
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|      | 7/1/2019   |                      |
|------|--|----------------------|
| The  | e date of each amendment(s) adoption:  | _, if other than the |
| date | e this document was signed.  |                      |
|      | 7/1/2019   |                      |
| Effe | ective date if applicable:   |                      |
|      | (no more than 90 days after amendment file date)   |                      |
|      | te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not burnent's effective date on the Department of State's records.   | oe listed as the     |
| Ada  | option 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  Signature is A Allma ( Airaya)  |                      |
|      | (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) | _                    |
|      | Mariangel Carcoya  (Typed or printed name of person signing)   |                      |
|      | Chairaomay (Title of person signing)   |                      |