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COVER LETTER

TO: Amendment Section Division of Corporations

Central Flori	a Achievements & Outco	mes, Inc.	
N07000003042			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee	ire submitted for filing.		
Please return all correspondence concerning the	is matter to the following:		
James E. Keller			
	(Name of Contact	Person)	
Central Florida Achievements & Outcomes, I	c.		
	(Firm/ Compa	iny)	
P.O. Box 941338			
	(Address)	· · ·	
Maitland, FL 32794			
	(City/ State and Zi	p Code)	-
jekeller0616@gmail.com			
E-mail address: (to	be used for future annual i	report nolificatio	n)
For further information concerning this matter	please call:		
James E. Keller		407 at	923-5582
(Name of Contact		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount	nade payable to the Florid	a Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Certificate of		Certit y is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address	<u>.</u>	Street Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Central Florida Achievements & Outcomes, Inc.		
Name of Corporation as currently filed with the Florida I	Dept. of State)	
807000003042		
(Document Numb	er of Corporation (if	known)
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not I</i>	Cor Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:	
		The new
name must be distinguishable and contain the word "corporat "Company" or "Co," may not be used in the name	ion" or "incorporat	ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	æ. Þ
		APR 25
C. Enter new mailing address, if applicable:		87 9 Hd
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>
		 f s
	-	
D. If amending the registered agent and/or registered office		a, enter the name of the
new registered agent and/or the new registered office a	<u>ddress:</u>	
Name of New Registered Agent:		
	1	Horida street oddressi
New Registered Office Address:		
· 		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered		
I hereby accept the appointment as registered agent.—I am far	niliar with and accep	or the obligations of the position.
	mortues of Vana Davi	stered Agent, if changing
-i	униште ој жем кеуп	метен лусти, у спапуту

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	PT John I V Mike SV Sally		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>VD</u>	Robert Moodie	9548 Trumpet Vine Loop Trinity, FL 34655
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 addir (attach additional shee	ng additional Ai	rticles, enter change(s) here: (Be specific)	<u> </u>
			
		-	

<u> </u>	
	
	
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The date of each amendment(s) adoption: due this document was signed.	, if other than the
ditte this document was signed.	
Effective date if applicable: April 21, 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 date will not be document's effective date on the Department of State's records.	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 amendment(s) was/were sufficient for approval.

.

There are no membe adopted by the board	rs or members entitled to vote on the amendment(s). The amendment(s) was/were d of directors.
Dated _ Signature _ (B	y the Hairman or vice chairman of the board, president or other officer-if directors
	ave for been selected, by an incorporator – if in the hands of a receiver, trustee, or ther court appointed fiduciary by that fiduciary)
	James E. Keller
	(Typed or printed name of person signing)
	President
	(Title of person signing)