(Re	equestor's Name)	
(Ac	Idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to Filing Officer:		

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Newpoint High of Tampa, Inc.		
DOCUMENT NUMBER:	N08000007044		
The enclosed Articles of Amendment ar	nd fee are submitted for filing.		
Please return all correspondence concern	ning this matter to the following:		
Marcus May			
	(Name of Contact Person)		
Newpoint Schools			
	(Firm/ Company)		
700 W. 23rd St, Buildin	g H (Address)		
Panama City, Florida 3	2405 (City/ State and Zip Code)		
For further information concerning this	•		
Mary May (Name of Contact Person)	at (330) 706 4055 (Area Code & Daytime Telephone Number)		
, ,	nount made payable to the Florida Department of State:		
✓ \$35 Filing Fee	&		
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 Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Newpoint H	High of Tar	npa. Inc.	- PC 18
(Name of Corporation as current)	ly filed with th	e Florida Dept. of S	State P
			30 T
(Document Number	000007044 r of Corporation	n (if known)	Size =
(= 003/10/1/14/1/2001	. or corporation	(1 <i>i</i> 1)	70
arsuant to the provisions of section 617.1006, Flo		his <i>Florida Not For</i>	Profit Corporation
e following amendment(s) to its Articles of Incor	rporation:		(A)
If amending name, enter the new name of the	e corporation	1	,
		•	
		· · · · · · · · · · · · · · · · · · ·	11)
e new name must be distinguishable and conto breviation "Corp." or "Inc." <u>"Company" or "(</u>	ain ine wora Co." mav not l	corporation" or "ir neused in the name	icorporated" or the
		e was an end manne.	
Enter new principal office address, if applica			
Principal office address <u>MUST BE A STREET A</u>	ADDRESS)		
7			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	ROY)		
(Matting datiess MAT BE A POST OFFICE	<u> </u>		
	_	· · · · · · · · · · · · · · · · · · ·	
			
If amending the registered agent and/or regis	stered office a	ddress in Florida, e	nter the name of the
new registered agent and/or the new register			
Name of New Parintoned Agent:			
Name of New Registered Agent:			
			
New Registered Office Address:	(Florid	a street address)	
			. Florida
-		(City)	(Zip Code)
		((- F)
w Registered Agent's Signature, if changing I			
hereby accept the appointment as registered ag	gent. I am fo	miliar with and acc	ept the obligations of
sition.			
			
Sign	ature of New I	Registered Agent, if c	hanging

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:			
	itional sheets, if necessary)		-
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Q Add Q Remove
			L Remove
			
		-	Hampia •
	ling or adding additional Articles, ente		
CORPOR	ATE LIQUIDATION and DISSOLU	TION:	
No person	, firm or corporation shall ever rec	eive any dividends or profits	from the
undertakin	ng of this corporation. In the event	of the dissolution of the corp	oration, the
Board of T	rustees ("Board") shall, after payir	ng or making provisions for th	ne payment
of all the li	abilities of the corporation, dispose	e of all the remaining assets	of the
corporation	n, exclusively for the purposes of t	he corporation in such mann	er, or to such
organizatio	on or organizations organized and	operated for charitable, edu-	cational, religious
or scientifi	c purposes, as shall at the time qu	alify as an exempt organizat	ion or
organization	ons under Section 501(c)(3) of the	Internal Revenue Code of 1	986 (or the
correspon	ding provisions of future United St	ates Internal Revenue Law),	as the Board
shall deter	rmine. Any of such assets not so	disposed of shall be disposed	d of by the Court
having pro	pper jurisdiction in the County in w	hich the principal office of the	organization
is the loca	ited, exclusively for such purposes	or to such organization or o	rganizations,
as said Co	ourt shall determine, which are org	anized and operated exclusi	vely for such
purposes.			

The date of each amendment(s) adoption: 9/1/08				
Effective date <u>if applicable</u> :	9/1/08			
	(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	re adopted by the members and the number of votes cast for the amendment(s) roval.			
There are no members or adopted by the board of dis	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.			
Dated 9-1- Signature	08 1/2/1/2			
(By hav	the chairman or vice chairman of the board, president or other officer-if directors e not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)			
·	Marcus May (Typed or printed name of person signing)			
	Incorporator (Title of person signing)			
	(Time of person signing)			