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COVER LETTER

TO: Amendment Section Division of Corporations

THE JUDAH'S NATION CHILDRENS FOUNDATION, INC. NAME OF CORPORATION:
N09000003856 DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LIONEL NELSON SR.
(Name of Contact Person)
LIONEL NELSON SCHOOL OF CREATIVE ARTS INC
(Firm/ Company)
20650 NORTH MIAMI AVENUE
(Address)
MIAMI FL 33169
(City/ State and Zip Code)
DOMINIONSOLUTIONS@ATT.NET
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
DONALD KIRSCH C/O DOMINION TAX & ACCOUNTING 954-458-4626 / 954-558-1961 < CELES
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing Address Amendment Section Street 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 of

THE JUDAH'S NATION CHILDRENS FOUNDATION, INC.

(Name of Corporation as c	currently filed with the Florida Dept. of State)	
N09000003856		
(Document)	Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the amendment(s) to its Articles of Incorporation:		following
A. If amending name, enter the new name of the corp	poration:	25. 25. 10.
LIONEL NELSON SCHOOL OF CREATIVE ARTS II	INC	The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated" or the abbreviation "Corp." o	Inc. 'I
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	RESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		
Name of New Registered Agent:	N/A	
New Registered Office Address:	(Florida street address)	
	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. It	stered Agent; 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 <math>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 V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	LIONEL NELSON	20650 NORTH MIAMI AVENUE
Add X Remove			MIAMI FL 33169
2) Change	P	LIONEL NELSON SR.	20650 NORTH MIAMI AVENUE
X Add			MIAMI FL 33169
Remove 3) Change	v	ERIC SNELL	20650 NORTH MIAMI AVENUE
Add			MIAMI FL 33169
X Remove			
4) Change	v	JONATHAN A FERGUSON	2311 WILEY STREET
X Add			HOLLYWOOD FL 33023
Remove			<u> </u>
5) Change	s	GWENDOLYN WASHINGTON	20650 NORTH MIAMI AVENUE
Add			MIAMI FL 33169
X Remove			
6) Change	VP	SHERELIA NELSON	20650 NORTH MIAMI AVENUE
X Add			MIAMI FL 33169
Remove			

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)		
•		NA	
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•		10/27/2015	
	e date of each amendment e this document was signed		, if other than the
Eff	ective date <u>if applicable</u> :	10/27/2015	
		(no more than 90 days after amendment file date)	
		is block does not meet the applicable statutory filing requirements, this date with the Department of State's records.	ill not be listed as the
Ado	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/w was/were sufficient for ap	rere adopted by the members and the number of votes cast for the amendment(sproval.)
=	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	10/27 Dated	/2015	
	Signature		
	have r	rchairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator — if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	LI	ONEL NELSON SR.	
		(Typed or printed name of person signing)	
	PR	ESIDENT	
		(Title of person signing)	