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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Cornersto	ne Neighbor	rhood School, Inc.
DOCUMENT NUMBER: NO900005	5208	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Donald C. Corley		
	(Name of Contact Person	)
Cornerstone Schools, In	C.	
	(Firm/ Company)	
9039 Beach Blvd.		
	(Address)	
Jacksonville, FI 32216		
	(City/ State and Zip Code	2)
wcorley@ccsjax.c		
E-mail address: (to be used	_	notification)
For further information concerning this matter, please	call:	
Donald Corley	<sub>at</sub> 904	619-6484
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:
□ \$35 Filing Fee ■\$43.75 Filing Fee & Certificate of Status	_	□\$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	Amend Divisio Clifton 2661 E:	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

## Articles of Amendment to Articles of Incorporation

FILE

of

14 MR 28 PR P: 04

Cornerstone Neighborhood School, Inc.				to W. U.
(Name of Corporation as currently filed with the Florida Dept. of State	) TAL	다다. 1 사		COLUMBIA COLUMBIA
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(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

Cornerstone Schools, Inc.	The r
name must be distinguishable and contain the word "corpora <u>"Company" or "Co." may not be used in the name</u> .	tion" or "incorporated" or the abbreviation "Corp." or "In
B. Enter new principal office address, if applicable:	9039 Beach Blvd.
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Jacksonville, Fl 32216
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9039 Beach Blvd.
	Jacksonville, Fl 32216
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a	
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida
New Registered Office Address: (City)	, Florida
	, Florida

## 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	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>nes</u>	
Type of Action (Check One)	Title		Name	Address
1) Change Add		-		
Remove				
2) Change		_		
Add				
Remove				
3 ) Change	<del>- ,</del>	<del>.</del>		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		<del></del>		
Remove				

. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
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17° kalendari kada ka	

The	date of each amendment	(s) adoption: <u>U3/24/2U14</u>	, if other than the
	te this document was signed.  Tective date <u>if applicable:</u> 03/25/2014		
enective date <u>il applicable</u> .		(no more than 90 days after amendment file date)	
Ado	option of Amendment(s)	( <u>CHECK ONE</u> )	
	The amendment(s) was/w was/were sufficient for ap	were adopted by the members and the number of votes cast for the amendment(supproval.	;)
	There are no members or adopted by the board of a		
	Dated 03/	24/2014	
	Signature	D.M. C	
	have r	chairman 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)	
	Don	(Typed or printed name of person signing)	
	_	(Typed or printed name of person signing)	
	<u> </u>	ard Member	
		(Title of person signing)	