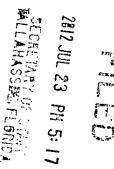
(Re	questor's Name)	12/25/3
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Lee Char	ter School c	of Excellence, Inc
DOCUMENT NUMBER: N0900007	016	
The enclosed Articles of Amendment and fee are subn	nitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
Yolanda Santos		
	(Name of Contact Persor	n)
LCSE		
	(Firm/ Company)	
PO Box 1077		
	(Address)	
Lehigh Acres FL 33970		
	(City/ State and Zip Code	2)
ysantos@msn.co		
E-mail address: (to be used For further information concerning this matter, please	·	notification)
Yolanda Santos		218-3123
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made page	yable to the Florida Depa	urtment of State:
□ \$35 Filing Fee ■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$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 assee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) Lee Charter School of Excellence, Inc

(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:

A. If amending name, enter the new nar		NIA	The ne
name must be distinguishable and contain "Company" or "Co." may not be used in		orporated" or the abbro	eviation "Corp." or "Inc.
B. Enter new principal office address, if (Principal office address MUST BE A ST		NIA	
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		N/A	· .
D. If amending the registered agent and new registered agent and/or the new		Florida, enter the nan	ne of the
Name of New Registered Agent:	610 Williams Ave		
New Registered Office Address:	(Florida street d	•	
	Lehigh Acres	, Florida	33972
	(City)	(Zip C	Code)
New Registered Agent's Signature, if che I hereby accept the appointment as registe.		uto	s of the position.

Page 1 of 4

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 = Secrétary; 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 D V Mike J SV Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	Dr Ronald Hunter	421 NW 201st Ave
Add			Pembroke Pines FL
X Remove			33029
2) Change	<u>D</u>	Josh Epstein	3182 Levante St
Add			Carlsbad, CA
X Remove			92011
3) Change	<u>D</u> · .	Edward L Gillespie	2408 Bennett Pt Rd
Add			Queenstown, MD
X Remove			21658
4) Change	ВМ	Robert Pietresanta	24284 Balearic Ln
Add			Punta Gorda FL
X Remove			33955
5) Change	BM_	Robert J Thompson	3240 So Shore Dr
Add			Unit 42 C
X Remove			Punta Gorda FL 33955
6) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove		Page 2 of 4	· · · · · · · · · · · · · · · · · · ·

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.

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Example: X Change X Remove X Add	<u>V</u> <u>Mi</u>	nn Doe ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Р	James R. Rost	418 Lincoln Ave
X Add			Lehigh Acres FL
Remove			33972
2) Change	<u>T</u>	Yolanda Santos	610 Williams Ave
X Add			Lehigh Acres FL
Remove			33972
3) Change	S	Jody A Davila	1017 Thompson Ave
X Add			Lehigh Acres FL
Remove			33972
4) Change	D	Troy Nelson	721 Joel Blvd Unit A
X Add			Lehigh Acres FL
Remove			33972
5) Change	D	Jonathan Santos	1017 James Ave
X Add			Lehigh Acres FL
Remove			33972
6) Change			
Add			
Remove			
Kemove			

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)		
The state of the s		 	
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The date of each amendment(s) add	_{option:} March 20, 2012
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes east for the amendment(s).
There are no members or members adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were s.
Dated _	
have not been	nan or vice chairman of the board, president or other officer-if directors in selected, by an incorporator – if in the hands of a receiver, trustee, or ppointed fiduciary by that fiduciary)
James R. F	Rost
. (Typed or printed name of person signing)
President	
	(Title of person signing)