N09000011647

(Requ	uestor's Name)	
(Addi	ess)	
(Addi	ess)	
(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	☐ MAIL
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Special Instructions to Fi	ling Officer:	
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Amend

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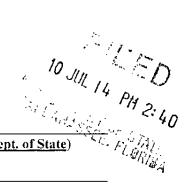
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Tekboard Edu	cation	al Syst	tem, Inc.	
DOCUMENT NUMI	BER: N09000011647				
The enclosed Articles	of Amendment and fee are sub	mitted fo	or filing.		
Please return all corre	spondence concerning this mat	ter to the	following	g:	
		onio Ma			
	(Name of	Contact	Person)		
	Tekboard Educational System, Inc.				
	(Firm/ Company)				
	1000 Park Centre Blvd Suite 150-A				
(Address)					
	Miami Gardens, Florida 33169				
	(City/ Stat	e and Zi	Code)		
	contact@tekboard.org E-mail address: (to be used for future annual report notification)		tion)		
For further information	n concerning this matter, please		re amiaai	report notifica	11011)
A 4 2 A 4 12			700	000 040	
Antonio Macli (Name o	of Contact Person)	at (_	(Area (923-0404 Code & Daytin	te Telephone Number)
Enclosed is a check for	the following amount made page	ayable to			
✓ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	Certi	3.75 Filin fied Copy itional co osed)	/	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amend Divisio P.O. Be	g Address Iment Section on of Corporations ox 6327 Issee, FL 32314		Amend Division Clifton	Address Iment Section on of Corporation Building Executive Center	15

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently filed with the Florida Dept. of State)

Tekboard Educational System, 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:

	and contain the word "corporation" or ny" or "Co." may not be used in the nam	
Enter new principal office address, i Principal office address <u>MUST BE A ST</u>		
Enter new mailing address, if applications (Mailing address MAY BE A POST O		
If amending the registered agent and new registered agent and/or the new	I/or registered office address in Florida registered office address:	a, enter the name of th
		a, enter the name of th
new registered agent and/or the new		a, enter the name of th
<u>Name of New Registered Agent:</u>	registered office address: (Florida street address)	, Florida
<u>Name of New Registered Agent:</u>	(Florida street address)	

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
SD	Wilma Macli	1000 Park Centre Blvd. # 150-A Miami Gardens, Fl. 33169	☐ Add ☑ Remove
<u>VD</u>	Jorge Macli	1000 Park Centre Blvd. #150-A Miami Gardens, Fl. 33169	☐ Add ☑ Remove
<u>TD</u>	Alberto F. Guzman	1000 Park Centre Blvd, # 150-A Miami Gardens, Fl. 33169	☑ Add □ Remove
E. <u>If amending</u> (attach addit	g or adding additional Articles, enter c ional sheets, if necessary). (Be specific	<u>hange(s) here</u> :	

			·-
			<u> </u>

The date of each amendment(s	s) adoption: July 12, 2010
	July 12, 2010 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
✓ The amendment(s) was/were was/were sufficient for approx	e adopted by the members and the number of votes cast for the amendment(s) oval.
There are no members or me adopted by the board of directions.	embers entitled to vote on the amendment(s). The amendment(s) was/were ctors.
Dated July 1 Signature	2, 2010 Marin Monda University
(By the have	he 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)
	Antonio Macli
	(Typed or printed name of person signing)
	Chairman
	(Title of person signing)