NIDDODDART

(Reque	estor's Name)	
(Addre	ss)	
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(City/S	tate/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Nar	me)
(Docu	ment Number)	<u> </u>
Certified Copies	Certificate	s of Status
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COVER LETTER

30 TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	DUTCH LEARNING	G CENTER, INC.			
DOCUMENT NUMBER: _	N100000002197				
The enclosed Articles of Ame	endment and fee are subr	mitted for filing.			
Please return all corresponder	nce concerning this matte	er to the following	:		
CAROLINE A. SUCAET					
		(Name of Contac	t Perso	on)	
DUTCH LEARNING CENT	ER, INC.				
		(Firm/ Comp	any)		
7901 HISPANOLA AVENU	E, UNIT 1912				
		(Address))		•
NORTH BAY VILLAGE, FL	_33141				
		(City/ State and Z	ір Сос	ie)	
Dutchleamingcentersf@yaho	o.com				
E-1	mail address: (to be used	for future annual	report	notification)
For further information conce	rning this matter, please of	call:			
OSCAR HILDERSON			56 at	ol.	8602256
C	Name of Contact Person)			rea Code)	(Daytime Telephone Number)
inclosed is a check for the fol	lowing amount made pay	able to the Florid	a Dep	artment of S	tate:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	343.75 Filing For Certified Copy (Additional copy enclosed)		Certific Certific	Filing Fee cate of Status ed Copy onal Copy is sed)
Mailing Ad	dress	5	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

• •

DUTCH LEARNING CENTER, INC.						
(Name of Corporation	as current	tly filed with the l	lorida Dept. of St	tate)		-
N10000002197						
(Docum	ent Numbe	er of Corporation (if known)			-
Pursuant to the provisions of section 617.1006, Floramendment(s) to its Articles of Incorporation:	ida Statute	s, this <i>Florida Not</i>	For Profit Corpor	ration adopts th	ne followin	g
A. If amending name, enter the new name of the	corporation	on:				
n/a					The nev	w
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ion" or "incorpor	ated" or the abbre	viation "Corp.		
B. Enter new principal office address, if applicat	ble:	2388 ZEDER AV	ENUE			
Principal office address <u>MUST BE A STREET AI</u>		DELRAY BEAC	H, FL 33444			•
					至 證	8
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<u>80X</u>)	2388 ZEDER AV	ENUE		E S	198
		DELRAY BEACE	H, FL 33444		V.C.	- -ω - ≥
						_3-
). If amending the registered agent and/or regist new registered agent and/or the new registere	tered office	e address in Florid	da, enter the name	e of the	ONDA	9: 06
Name of New Registered Agent:	OSCAR H	ILDERSON				_
	2388 ZEDI	ER AVENUE, DE	LRAY BEACH, F	L 33444		
New Registered Office Address:			(Florida street address	5)		
 -	DELRAY I			Florida 33444	· -	-
		(City)		(Zip Code)		
New Registered Agent's Signature, if changing Re hereby accept the appointment as registered agent.			ept the obligations	of the position.		
_	<	-6d	UBO)			
	Sig	nature of New Res	istered Agent, if ch	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:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

800

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>V</u> <u>Mil</u>	n Doe se Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	TD	HENRIETTE VAN DEN ELZEN	4308 DIAMOND WAY
Add			WESTON, FL 33331
X Remove			
2) X Change	TD	ARNAUD J. MENS	4713 LAKESIDE TERRACE
Add			DAVIE, FL 33314
Remove	SD	OSCAR HILDERSON	2388 ZEDER AVENUE
3) Change X Add	 		DELRAY BEACH, FL 33444
Remove			
4) Change			
Add			
Remove			
5) Change	 -		
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additiona (attach additional sheets, if necesso	ıry). (Be specific)				
1/A					
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No. Sec. 16

The	, if other than the		
	this document was		•
Effe	ective date <u>if applic</u>	able:	
		(no more than 90 days after amendment file date)	
	_	ed in this block does not meet the applicable statutory filing requirements, this date will not be te on the Department of State's records.	listed as the
Add	option of Amendme	ent(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
	There are no membadopted by the boa	pers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors.	
	Dated	NOVEMBER 1, 2018	
	Signature	× flu coel	
		By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
		CAROLINE A. SUCAET	
		(Typed or printed name of person signing)	
		PRESIDENT	
		(Title of person signing)	

No. of the second

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