N110000000495

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EFFECTIVE DATE 5-1-13 13 APR 25 PH 2: 29

Amend & MC

APR 3 0 2013

T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: BROWARD ACADEMIC RESOURCES CENTER, INC N17000000495 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MARVA NELSON
(Name of Contact Person) (Firm/ Company) 881 NW 35 TERR LAUDERHILL, IFL 33311 (City/State and Zip Code) 5 f com vas @ quai / com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MARVA NELSON at (954) 283 - 70-15 (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: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee ■ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 **Street Address**

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of



BROWARD ACADEMIC RESOURCES CENTER, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)
N11000000 495
(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 following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation: 5. FL ACADEMIC & COMMUNITY RESOURCES CENTER, INCommon must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) FT. LAUDERDALE, FL 33319
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: MARVA NELSON
New Registered Office Address: LAUDER HILL, Florida 333/1 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Mylan

Page 1 of 4

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 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 Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address
1) Change Add Remove	<u>P</u>	Roy Thomas	_	5465 NW 904 Ave Sunrise, FL 333
2) Change		_	_	
Add				
3) Change				
Remove				
4) Change Add				
Remove				
5) Change Add				
Remove				
6) Change Add			_	
Remove		·		

attach additional sheets, if necessary).	(Be specific)
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The date of each amendment(s) adoption: 4/1/13
Effective date if applicable: 5/1/13
(no more than 90 ddys after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 4/16/13
Signature Than I -
(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)
Helen Harrilal
(Typed or printed name of person signing)
Simanager Devations
(Title of person signing)