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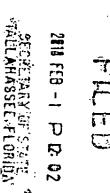
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T. LEMIEUX



COVER LETTER

TO: Amendment Section
Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

International Urban (NAME OF CORPORATION:	Consultants Inc				
N11000002742					
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are subn	nitted for filing.				
Please return all correspondence concerning this matte	r to the following:				
Amanda Nelson					
	(Name of Contact Perso	on)	. .		
	(Firm/ Company)				
630 37th St. S					
	(Address)				
St. Petersburg, FL 33711					
	(City/ State and Zip Co	de)			
fount 57 @gmail. Com E-mail address: (to be used					
E-mail address: (to be used	for future annual report	notification	1)		
For further information concerning this matter, please					
Amanda Nelson	72	27 Area Code)	482-6475		
(Name of Contact Person)) (/	rea Code)	(Daytime Telephone Number)		
Enclosed is a check for the following amount made page	yable to the Florida Dep	partment of	State:		
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is used)		
Mailing Address		t Address			
Amendment Section Amendment Section Division of Corporations Division of Corporations					
	- 1 - 1 D				

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

International Urban Education Consultants, Inc.			2818 FEB - 1 P. 1	n a	
(Name of Corporation	as curren	tly filed with the Florida Dept		12	
N11000002742			TALLAHASSEE FLORI	i T	
(Docum	ent Numb	er of Corporation (if known)	TO THE OWNER OF THE OWNER OWNER OF THE OWNER OWNE	ĬŸ.	
Pursuant to the provisions of section 617.1006, Floramendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida Not For Profit</i> (Corporation adopts the following		
A. If amending name, enter the new name of the	corporati	on:			
The School Days Foundation, Inc.			The new		
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		tion" or "incorporated" or the			
B. Enter new principal office address, if applical	ble:	630 37th St. S			
(Principal office address MUST BE A STREET A		St. Petersburg, FL 33711			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		630 37th St. S			
		St. Petersburg, FL 33711			
D. If amending the registered agent and/or registered agent and/or the new register			e name of the		
Name of New Registered Agent:		Nelson			
	630 37th St. S				
New Registered Office Address:	(Florida street address)				
New Neglinerea Office Hauress.	St. Petersburg		, Florida		
		(City)	(Zip Code)		
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen			gations of the position.		
(_	IW	wala helson			
	/ s	ignature of New Registered Ag	ent, if changing		

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 = 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>	nn Doe ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	Eric D, Thomas, PhD	10708 Boddebille Dr.
2) Change X Add	VI)	LaShanna N. Fountain, J.D.	Chard Lodge, MI 48837
Remove 3) Change X Add Remove	T	Latoya Nelson	Grand Leity, MI 18537
4) Change Add X Remove	CFO	Candis Quinney	
5) Change Add Remove	Р	Carlas Quinney Jr.	
6) Change Add Remove	<u>v</u>	Walter Bivens	

attach additional sheets, if i	necessary). (De	е ѕресіліс)				
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The date of each amendment(s) ado date this document was signed.	ption: <u>\/_\/_\/_\</u>	THURLY XX, CC		, if other than the
Effective date <u>if applicable</u> :				
	(no more than 90) days after amendment fil	e date)	
Note: If the date inserted in this block document's effective date on the Department.			quirements, this date will n	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members	and the number of votes ca	ist for the amendment(s)	
There are no members or member adopted by the board of directors		the amendment(s). The an	nendment(s) was/were	
Dated	Anvary 30,	<u> 2018 -</u>		
Signature		· .	-	
have not been		of the board, president or of porator – if in the hands of hat fiduciary)		
		N Fountain		
	(Typed o	or printed name of person s	signing)	
	ille Trand He	Executie Dia	ecipor	
		(Title of person signing	,)	