

N11000005478

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

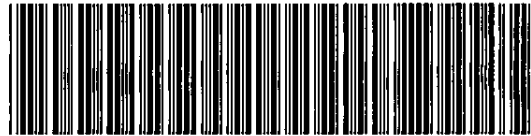
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500213161255

500213161255  
10/13/11--01022--019 \*\*35.00

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

11 NOV - 7 PM 1:25

FILED

*Amend  
Tewis  
11-7-11*

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Miami-Dade Foundation for Educational Innovation, Inc.

DOCUMENT NUMBER: N100005478

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Bell

(Name of Contact Person)

(Firm/ Company)

1080 LeBaron Drive

(Address)

Miami Springs, FL 33166

(City/ State and Zip Code)

mbellish@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Bell

(Name of Contact Person)

at ( 786 ) 298-9112

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee  
(see letter)

\$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

**Street Address**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 25, 2011

MICHAEL BELL  
1717 NORTH BAYSHORE DRIVE #2651  
MIAMI, FL 33132

SUBJECT: MIAMI-DADE FOUNDATION FOR EDUCATIONAL INNOVATION,  
INC  
Ref. Number: N11000005478

We have received your document for MIAMI-DADE FOUNDATION FOR EDUCATIONAL INNOVATION, INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis  
Document Specialist Supervisor

Letter Number: 911A00023657

RECEIVED  
11 NOV -7 AM 11:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

Miami-Dade Foundation for Educational Innovation, Inc.  
(Name of Corporation as currently filed with the Florida Dept. of State)

N100005478

(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 name of the corporation:**

*The new name 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)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_ (Florida street address)

\_\_\_\_\_, Florida \_\_\_\_\_  
(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.*

\_\_\_\_\_  
*Signature of New Registered Agent, if changing*

FILED  
11 NOV - 7 PM 1:25  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**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>	<u>Address</u>	<u>Type of Action</u>
Former Secretary	Maria Costa Smith (Resigned)	9350 SW 96 St. Miami, FL 33176	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Secretary	Yehuda Kaploun	17350 NE 7 Ave. North Miami Beach, FL 33162	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**  
 (attach additional sheets, if necessary). (Be specific)

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

The date of each amendment(s) adoption: 10 | 26 | 11  
*(date of adoption is required)*

Effective date if applicable: 10 | 27 | 11  
*(no more than 90 days 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 11 / 4 / 11

Signature Michael Bell  
*(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)*

Michael Bell  
*(Typed or printed name of person signing)*

President & Board Chair  
*(Title of person signing)*