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COVER LETTER

TO: Amendment Section Division of Corporations

Lig	hthouse Montessori Christian Cente	er	
NAME OF CORPORATION:			
N11000	006584		
DOCUMENT NUMBER:			
The enclosed Articles of Amendmen	and fee are submitted for filing.		
Please return all correspondence con	cerning this matter to the following	:	
Angel Luis Bracero			
	(Name of Contact	Person)	
Lighthouse Montessori Christian Ce	nter		
	(Firm/ Comp	any)	
650 NW Airoso Blvd.			
	(Address))	
Port St. Lucie, FL 34983			
	(City/ State and Z	ip Code)	
elfaro@bellsouth.net			
E-mail ad	dress: (to be used for future annual	report notification)	
For further information concerning t	his matter, please call:		
Angel Luis Bracero		772 57	9-8833
		at	
(Name o	of Contact Person)	(Area Code) (Da	nytime Telephone Number)
Enclosed is a check for the following	amount made payable to the Florid	ia Department of State	:
	75 Filing Fee & \$\sum \$\\$\\$43.75 Filing F\\$ificate of Status Certified Copy (Additional copenclosed)	Certificate	of Status Opy I Copy is

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Lighthouse Montessori Christian Center, Inc.

(Name of Corporation as currently filed with the F N11000006584	lorida Dept. of State)	<u>`</u> >
(Documen	nt Number of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florid amendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida Not For Prof</i>	it Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:	
Lighthouse City Academy & Preschool, Inc.		The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation" or "incorporated" or th	
B. Enter new principal office address, if applicable	650 NW AIROSO BLVD.	
(Principal office address <u>MUST BE A STREET AD)</u>	DRESS) PORT ST. LUCIE, FL. 3499	83
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	3525 W MIDWAY RD.	
	FORT PIERCE, FL 34981	
D. If amending the registered agent and/or registe		the name of the
new registered agent and/or the new registered	office address:	
Name of New Registered Agent:	525 W MIDWAY RD.	
.3.	<u></u>	
New Registered Office Address:	(Florida sti	reet address)
	ORT PIERCE	34981 , Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		ligations of the position.
	Signature of New Registered A	gent, 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 Doc Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add		.,	
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		nal Articles, enter change(s) her sary). (Be specific)	<u>re</u> :
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	<u> </u>	
		
		
The date of each amendment(s) adoption: date this document was signed.		, if other than the
Effective date if applicable:	o more than 90 days after amendment file date)	
(Ar	o more man 70 days aper amenament file date)	
<u>Note:</u> If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be of State's records.	e listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)	

adopted by the bo	ard of directors.
	11/03/2020
Dated	An a Sing Rosers
Signaturg	(By the charman 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) ANGEL LUIS BRACERO
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were