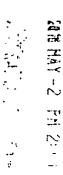
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COVER LETTER

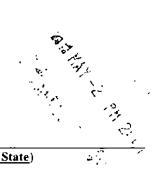
TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	NEW ALKEBULAN	SCHOOLS OF FL. I	NC.		
NDOCUMENT NUMBER: _	11000010826				
The enclosed Articles of Ame	ndment and fee are subm	itted for filing.			
Please return all corresponden	ce concerning this matter	to the following:			·
CHERYL IRVIN					
	(Name of Contact Per	son)		· · · · · · · · · · · · · · · · · · ·
.		(Firm/ Company)			
		(Fillir Company)			
134 NW 109th AVENUE, #2	02 				
		(Address)			
PEMBROKE PINES, FL 330	26				
	(1	City/ State and Zip C	ode)		
cheryl.irvin@YAHOO.COM					
E-1	nail address: (to be used l	or future annual repo	ort notification	1)	
For further information conce	ming this matter, please c	all:			
CHERYL IRVIN		at	786	426-4406	
(1	Name of Contact Person)		(Area Code)	(Daytime Teleph	one Number)
Enclosed is a check for the fol	llowing amount made pay	able to the Florida D	epartment of S	State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & □ Certificate of Status		Certifi Certifi	O Filing Fee icate of Status led Copy tional Copy is used)	
Mailing Ad	ldress	Stre	et 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



NEW ALKEBULAN SCHOOLS OF FL, INC.

(Name of Corporation as cur	rrently filed with the Florida Dept. of State)
N11000010826	
(Document No	umber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	orațion:
NEW ALKEBULAN STEM EDUCATION CENTER, IN	NC. The ne
name must he distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation "Corp." or "Inc.
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u>	55) 4097 N.W. 16 St.
	Lauderhill, FL 33313
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8403 PINES BLVD
	SUITE #130
	PEMBROKE PINES, FL 33024
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 offi	ce address:
Name of New Registered Agent: N/A	
New Registered Office Address:	(Florida street address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	ered Agent: m familiar with and accept the obligations of the position.
	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: XChange X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Joi Sally Sm	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		. 	N/A	
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		<u> </u>
Add				
Remove				

(anach anamonai snee	ets, if necessary). (Be	e specific)			
N/A					
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
04/26/2019	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will redocument's effective date on the Department of State's records.	not be listed as the
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 04/26/2019 Signature 100.4	
(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)	
Cheryl Irvin	
(Typed or printed name of person signing)	
President	
(Title of person signing)	