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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: _	PETER PAN COMM	MUNITY EDUCAT	IONAL CEN	TER INC.		
N12 DOCUMENT NUMBER:	.000004095					
The enclosed Articles of Amenda	nent and fee are subm	itted for filing.		***		
Please return all correspondence of	concerning this matter	to the following:				
	SH	ERRY VERTIL				
	(Name of Contact Po	erson)			
	BELIEVE	COMMUNITY SER	RVICES INC.			
		(Firm/ Company	·)	· · · · · · · · · · · · · · · · · · ·		
	335	NE 48TH STREET	#221			
		(Address)		,		
	DEEF	RFIELD BEACH FL	. 33064			
	(City/ State and Zip	Code)			
	BELI	EVEBIG.INFO@G	MAIL.COM		207 St	
E-mail	address: (to be used og this matter, please of		ort notification	on)	SHCRETAR TALL AH	3
SI	HERRY VERTIL	at	954-709-04	8 ' 4	77 Y S 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ر <u>ي</u>
(Nan	ne of Contact Person)		(Area Code)	(Daytime Tele	ephyll Nu	<u>e</u> r)
Enclosed is a check for the follow	ving amount made pay	yable to the Florida	Department of	f State:	41,	<u></u>
□ \$35 Filing Fee ■\$4	43.75 Fiting Fee & [ertificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certi s Certi (Add	60 Filing Fee ficate of Status fied Copy itional Copy is osed)	·	

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

ETER PAN COMMUNITY EDUCATIONAL CENTER INC..

(Name of Corporation as currently filed with the	Florida Dept. of State)
N12000004095	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 617,1006, Floriamendment(s) to its Articles of Incorporation:	da Statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the	<u>corporation:</u>
N/A	The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.	"corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicab	ole:
(Principal office address MUST BE A STREET AL	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	(OX)
If amending the registered agent and/or regist new registered agent and/or the new registere	tered office address in Florida, enter the name of the S
•	BELIEVE COMMUNITY SERVICES INC.
Name of New Registered Agent:	335 NE 48TH STREET #221 @
	(Florida street address)
New Registered Office Address:	DEERFIELD BEACH , Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing R	egistered Agent:
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position. Slevy Vett / BCS
	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 & V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Mike Jones, V as Remove, and Sally Smith, SV as an Add. Example: John Doe X Change Mike Jones X Remove Sally Smith X Add Address Type of Action Title Name 1 (Check One) 1060 NW 6TH AVE PAUL LITTLES D 1) ____ Change POMPANO BEACH FL 33060 Add ×_ Remove 410 NW 14TH STREET DS SHARECE VERTIL 2) ____ Change POMPANO BEACH FL 33060 × Add Remove 335 NE 48TH STREET #221 CYNTHIA LITTLE 3) _x_ Change DP DEERFIELD BEACH FL 33064 Add Remove 410 NW 14TH STREET SHARNELL LOUIS __ Change POMPANO BEACH FL 33060 ×__ Add Remove JAMERE ROGERS 410 NW 14TH STREET D 5) ____ Change ___ Add POMPANIO BEACH FL 33060 __ Remove 410 NW 14TH STREET VP**ERNESTINE PRICE** _x_ Change POMPANO BEACH FL 33060 Add

Remove					
E. If amending or ad (attach additional s	ding additional Article heets, if necessary). (E	s, enter change(s) Be specific)	<u>here</u> :		
					
			· ·		-

The date of each amendment(s) adoption: date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date)	, if other than the
07.10.2024	
	PM 1: 37
	2024 DEC 18 PM SECRETARY OF TALLAHOSSE
<u>o</u>	

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated O8-14-2024 Signature Cynthia Littles
(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)
CYNTHIA LITTLE
(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

adopted by the board of directors.

SECRETARY OF SECRETARY OF STA