N1200005620

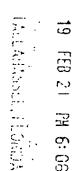




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FEB 2 6 2019 S. YOUNG



COVER LETTER

Division of Corporations noenix Learning, Academy, Inc DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Natalie Peters (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \Bigcup \$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

Mailing Address

TO: Amendment Section

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

Articles of Amendment to Articles of Incorporation of

Phoenix Leouning A	cadeny, I	nc.	
(<u>Name of Corporation as cu</u>	rrently filed with the F	lorida Dept. of State)	
N1200000 5620			
(Document N	lumber of Corporation (i	f known)	
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	tatutes, this Florida Not	For Profit Corporation adopts t	he following
A. If amending name, enter the new name of the corp	oration:		
			The new
name must be distinguishable and contain the word "cor _i "Company" or "Co." may not be used in the name.	poration" or "incorpora	ted" or the abbreviation "Corp.	." or "Inc."
B. Enter new principal office address, if applicable:	ECC \		
(Principal office address <u>MUST BE A STREET ADDRI</u>	<u> </u>	7.7	19
			· FEB
	· · · · · · · · · · · · · · · · · · ·	<u> </u>	ري ري
C. Enter new mailing address, if applicable:		ن. ب	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
		· · · · · · · · · · · · · · · · · · ·	6: 06 6: 06
			98
D. If amending the registered agent and/or registered	office address in Florid	la, enter the name of the	
new registered agent and/or the new registered off	fice address:		
Name of New Registered Agent:			
		(Florida street address)	
New Registered Office Address:		,,	
	(C:+.)	, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	ered Agent: um familiar with and acco	2pt the obligations of the positio	n.
	Signature of New Reg	zistered 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: X Change X Remove X Add	V Mike	Doe e Jones v Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u> </u>	Marlene Loewen	Wilton, F1 32583
2) Change Add	<u>\</u>	Dayna Beddick	369 Mirabelle Dr. Pensacola, F1 32514
Remove 3) Change Add Remove			
4) Change Add Remove			
5) Change Add			
Remove 6) Change Add Remove			

utach additional sheets, if nece	essarv). (be	specific)				
					<u> </u>	<u> </u>
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The date of each amendment(s) adoption:		, if other than the	
Effective	date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
	the date inserted in this block's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will neartment of State's records.	ot be listed as the
Adoption	of Amendment(s)	(CHECK ONE)	
	amendment(s) was/were ad/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s) l.	
	re are no members or members of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
	Dated 2-1	5-19	
	Signature		
	(By the chair have not become	man or vice chairman of the board, president or other officer-if directors in selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
	Je	(Typed or printed name of person signing)	
	Pre	SIANT (Title of person signing)	