N12000007248

(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



700263340227

08/20/14--01016--023 **43.7

14 AUG 20 PH 5: 22
SEUNE TARY OF STATE
TAIL AHASSEE, FLORID

M. Will

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: GREENTRE	EE PREP CHAI	RTER SCHOOL	, INC.	
DOCUMENT NUMBER: N12000007	248			
The enclosed Articles of Amendment and fee are subr	mitted for filing.		SECNE	
Please return all correspondence concerning this matter to the following:				
MARIA A ROMERO				
•	(Name of Contact Person	1)	$\frac{\pi_{\mathcal{O}}}{\pi_{\mathcal{O}}}$	
GREENTREE PREP CH	IARTER SC	HOOL, INC	DE LO	
	(Firm/ Company)			
750 N.W. 180TH TERRA	√CE			
	(Address)			
PEMBROKE PINES, FL	33029			
	(City/ State and Zip Code	:)		
MARIA@SUAREZ			_	
For further information concerning this matter, please	·	·		
		210 7227		
MARIA A ROMERO	at (<u>786</u>	218-7227 de & Daytime Telephone N		
(Name of Contact Person)	(Area Co	ide & Daytime Telephone N	umber)	
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:		
□ \$35 Filing Fee □ \$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	Amendi Division Clifton 2661 Es	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301		

Articles of Amendment Articles of Incorporation

GREENTREE PREP CHARTER SCHOOL, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N120000007248

(Document Number of Corporation (if known)

NOT APPLICABLE	the word "cornoral	ion" or "incorporated" or the abbreviation	Th
"Company" or "Co." may not be used in		•	Corp. or
3. Enter new principal office address, Principal office address <u>MUST BE A S</u>		SAME	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST (SAME	
		SAME	
	<i>OFFICE BOX)</i> d/or registered offic	e address in Florida, enter the name of th	<u>e</u>
(Mailing address <u>MAY BE A POST</u> (D. <u>If amending the registered agent an</u>	<i>OFFICE BOX)</i> d/or registered offic	e address in Florida, enter the name of th	<u>e</u>
(Mailing address MAY BE A POST (). If amending the registered agent an new registered agent and/or the new	OFFICE BOX) d/or registered office a	e address in Florida, enter the name of th	<u>e</u>
(Mailing address MAY BE A POST (). If amending the registered agent an new registered agent and/or the new Name of New Registered Agent:	OFFICE BOX) d/or registered office a	e address in Florida, enter the name of th	<u>e</u>

Page 1 of 4

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)

Remove

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 John Doe X Remove Mike Jones SVX Add Sally Smith Type of Action Title <u>Name</u> Address (Check One) **ROSA POU** DIRECTOR 750 NW 180TH TERRACE 1) ____ Change PEMBROKE PINES, FL 33029 Add Remove **ELIZABETH GONZALEZ** PRESIDENT 750 NW 180TH TERRACE 2) ____ Change PEMBROKE PINES, FL 33029 _ Add Remove DAMARYS PERDIGON **CHAIR** 750 NW 180TH TERRACE 3) _ Change PEMBROKE PINES, FL 33029 Add _ Remove JENNIFER ROQUE DIRECTOR 750 NW 180TH TERRACE 4) ____ Change PEMBROKE PINES, FL 33029 Remove 5) ____ Change Add Remove 6) ____ Change Add

E. If amending or adding additional Articles, enter change(s) here:	
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
NO OTHER CHANGES	
	14 AUG 20 PM 5: 23 TALL HARSEE FLORID
	20 [
	G 20 PM 5
	स्य प
	23
	·- ·- ·-
	· · · · · · · · · · · · · · · · · · ·

	e date of each amendment(s) ado this document was signed.	ption: AUGUST 15, 2014		, if other than the	
Effective date if applicable:					
		(no more than 90 days after amendment file date)			
Ado	option of Amendment(s)	(CHECK ONE)			
	The amendment(s) was/were add was/were sufficient for approval	pted by the members and the number of votes cast for the	: amendment(s)		
	There are no members or member adopted by the board of director	ers entitled to vote on the amendment(s). The amendment s.	:(s) was/were		
	ALIGHS	ST 15, 2014			
	Dated AUGUE	7// / / / / / / / / / / / / / / / / / /			
	Signature	10/		_	
		nan or vice chairman of the board, president or other offic is selected, by an incorporator – if in the hands of a receive			
		pointed fiduciary by that fiduciary)	ii, iiusice, oi		
	MARIA A R	OMERO			
		Typed or printed name of person signing)		•	
	DIRECTOR		FALL	F :- 10	
		(Title of person signing)	AHASSEC	FILE T	
			<u> </u>	5 5	