

N1200 0008343

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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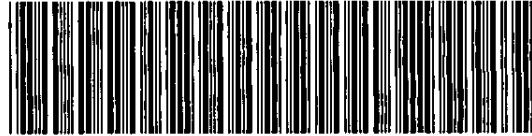
(Business Entity Name)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** FLORIDA DISTRICT VIRTUAL INSTRUCTION PROGRAM NETWORK, INC.

**DOCUMENT NUMBER:** N12000008343

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brandi Gurley

\_\_\_\_\_  
(Name of Contact Person)

Florida District Virtual Instruction Program Network, Inc.

\_\_\_\_\_  
(Firm/ Company)

1705 Edgewater Dr. #540179

\_\_\_\_\_  
(Address)

Orlando, Florida 32804

\_\_\_\_\_  
(City/ State and Zip Code)

brandi.gurley@ocps.net

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brandi Gurley

407

317-3327

at

\_\_\_\_\_  
(Name of Contact Person)

\_\_\_\_\_  
(Area Code)

\_\_\_\_\_  
(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|---|--|---|--|

**Mailing Address**

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

FLORIDA DISTRICT VIRTUAL INSTRUCTION PROGRAM NETWORK, INC.

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

N12000008343

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

N/A

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**

(Principal office address **MUST BE A STREET ADDRESS**)

1705 Edgewater Dr. #540179

Orlando, Florida 32804

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

1705 Edgewater Dr. #540179

Orlando, Florida 32804

**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 office address:**

Name of New Registered Agent:

Heather Price

1705 Edgewater Dr. #540179

(Florida street address)

New Registered Office Address:

Orlando

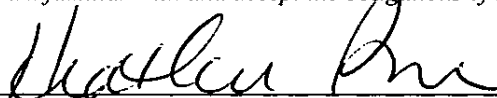
(City)

Florida 32804

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

I hereby accept the appointment as registered agent. I am 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change	<u>S</u>	<u>Joanne Glenn</u>	<u>10436 Greendale Dr.</u>
<input type="checkbox"/> Add			<u>Tampa, FL 34655</u>
<input type="checkbox"/> Remove			
2) <input checked="" type="checkbox"/> Change	<u>P</u>	<u>Heather Price</u>	<u>2700 Judge Fran Jamieson Way</u>
<input type="checkbox"/> Add			<u>Viera, FL 32940</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>L</u>	<u>Jessica Lowe</u>	<u>15 San Bonita Way</u>
<input type="checkbox"/> Add			<u>Havana, FL. 32333</u>
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>SC</u>	<u>Debra Johnson</u>	<u>7071 Garden Rd.</u>
<input type="checkbox"/> Add			<u>Building 2</u>
<input checked="" type="checkbox"/> Remove			<u>Riviera Beach, FL 33404</u>
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

**E. If amending or adding additional Articles, enter change(s) here:**  
(attach additional sheets, if necessary). (Be specific)

Adding Purpose: The Corporation is organized and operated exclusively for charitable, educational, religious, or scientific purposes within the meaning of section 501 (c) (3) of the Internal Revenue Code.

Adding Article VIII Dissolution Clause: A. Upon dissolution of the FLORIDA DISTRICT VIRTUAL INSTRUCTION PROGRAM NETWORK, INC., after paying or making provision for payment of all liabilities, the organization shall dispose of all assets of the organization by transferring such funds to an organization of similar purpose and section of 501 (c) (3) of the Internal Revenue Code. The organization's assets will be distributed to an organization with one or more exempt purposes with the meaning of 501 (c) (3) of the Internal Revenue Code or corresponding section of any future federal tax code, or shall be distributed to the federal, state or local government for a public purpose.

B. No funds shall go to the benefit of any individual with membership or position in the organization.

The date of each amendment(s) adoption: October 28, 2015, if other than the date this document was signed.

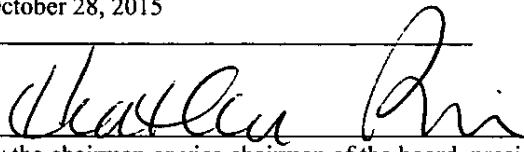
Effective date if applicable: October 28, 2015  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will 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.
- ☒ 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 October 28, 2015

Signature   
(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)

Heather Price

\_\_\_\_\_  
(Typed or printed name of person signing)

President

\_\_\_\_\_  
(Title of person signing)