## N12000008508

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| ☐ PICK-UP               | ☐ WAIT             | MAIL         |
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| Certified Copies        | _ Certificates     | of Status    |
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| Special Instructions to | Filing Officer:    | ļ            |
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SECRETARISEE PLONDS

MAY 14 2014 C. CARKOTTAL . . .

## **COVER LETTER**

PTO, Inc.

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION: (ape Cara)                              | Preparate   | ory and fitness Academy  |
|--|---|--|
| DOCUMENT NUMBER: N170000                                     | 08508   |  |
| The enclosed Articles of Amendment and fee are submitt       | ed for filing.  |  |
| Please return all correspondence concerning this matter to   | the following:  |  |
| Robert Peters  |   | •  |
| (N   | ame of Contact Person   | 1)   |
| Cape Coral Preparatory o                                     | (Firm/ Company)   | ss Akademy PTO, INC  |
| 2170 Santa Barba   | ra Blud. (Address)  |  |
| Cape Coral Fl  | 3 3 <b>9 9</b><br>ity/ State and Zip Cod                          |  |
| CPFAPTO Lemail address: (to be used for                      | GMail,  | COM notification)  |
| For further information concerning this matter, please cal   |   |  |
|  |   | 362 8469<br>ode & Daytime Telephone Number)  |
| Enclosed is a check for the following amount made payab      |   |  |
|  | \$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 | Amend   | Address Iment Section  |
| DIVINOU OF COLUMNIS  | DIVISIO   | IN CLEE OFFICIATIONS   |

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

| 10 es | 17 | 1.7 | (cha<br>gles<br>sácu | 7) |
|-------|----|-----|----------------------|----|
|-------|----|-----|----------------------|----|

|  | of .                                     |                         | E.L.             |
|--|--|-------------------------|------------------|
| Cape Coral Preparate   | <i>a i</i> - 1                           | 5 Academy               | PTOILAC          |
| (Name of Corporation as currently filed with the Flo   | orida Dept. of State)                    | SECRETARY               | To the Committee |
| N120000085   | 08                                       | JALLAHASSEE             | . rl.orida       |
| (Document Number of Co   |  |                         | _                |
| Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:         | es, this <i>Florida Not For Profit C</i> | orporation adopts th    | e following      |
| A. If amending name, enter the new name of the corporat  | ion:<br>N/A                              |                         | The new          |
| name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.             | tion" or 'incorporated" or the a         | abbreviation "Corp."    |                  |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS               | 2170 Santo<br>Cape Coral                 | g Barbara<br>F1 3390    |                  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)                                | 2170 Santu B<br>Cape Coral E             |                         |                  |
| D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a | ce address in Florida, enter the         | name of the             | _                |
|  | ia Pelacero                              |                         |                  |
| 2170   | Santa Barba                              | ra Blud                 |                  |
| New Registered Office Address: Cape Ca   | 974 , Flo                                | orida <u>3399</u>       | ·/               |
| (City)   |  | (Zip Coa                | 'e)              |
| New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa  |  | utions of the position. |                  |
| Signatura of Nav   | Registered Agent, if changing            |                         |                  |
| Signature of New   | REPISIEI EU APERI. II CHANYING           |                         |                  |

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)

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 | PT         John I           V         Mike I           SV         Sally S | <u>lones</u>   |   |
|----------------------------------|---|----------------|---|
| Type of Action<br>(Check One)    | <u>Title</u>  | <u>Name</u>    | <u>Addres</u> s                         |
| 1) Change Add Remove             | <u>_V</u>   | Christina Cain | 1109 SE 30th St<br>Cape Coral FL 33904  |
| 2) Change Add                    | P   | Robert Peters  | 1801 NE 18+4 Ave<br>Cape Coral Fl 3390  |
| Remove 3) Change Add Remove      | <u>P</u> _  | Tiffany Wilson | 915 SE 29+L terr<br>Cape Coral F133904  |
| 4) Change Add Remove             | <u>V</u>  | Cari Marrerpo  | 1429 SE Z4th Ave<br>Cape Coral Fl 33990 |
| 5) Change Add Remove             | <u> </u>  | Eric Carr      | 3322 Oasis Blud<br>Cape Coral F1 33914  |
| 6) Change Add Remove             |   | <del></del>    |   |

| . If amending or adding additional Art (attach additional sheets, if necessary).  | (Re specific) |
|---|---------------|
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|   | N/A           |
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|     | e date of each amendment(s) adoption: 3/11/2014 e this document was signed.  | , if other than the |
|-----|--|---------------------|
| Eff | ective date <u>if applicable</u> :  (no more than 90 days after amendment file date)   |                     |
| Ade | option of Amendment(s) ( <u>CHECK ONE</u> )  |                     |
|     | The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.   |                     |
| Ø   | 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 3/11/2014 Signature 2000000000000000000000000000000000000  |                     |
|     | (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) |                     |
|     | Robert Peters  |                     |
|     | (Typed or printed name of person signing)  President   |                     |
|     | (Title of person signing)  |                     |

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