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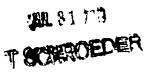




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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	O INSTITUTE INC			
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee				
Please return all correspondence concerning the	nis matter to the following	ıg:		
RODNEY S WHITE CPA				
	(Name of Conta	act Person)		
RODNEY S WHITE CPA				
	(Firm/ Con	npany)		
4650 LIPSCOMB STINE, SUITE 20				
	(Addre	ss)		
PALM BAY, FL 32905				
	(City/ State and	Zip Code)	4 · · · · · · · · · · · · · · · · · · ·	
RODWHITECPA@EARTHLINK.NET				
E-mail address: (to	be used for future annu	al report notification	on)	
For further information concerning this matter	r. please call:			
RODNEY S WHITE CPA		321 at	728-9366	
(Name of Contac	t Person)	(Area Code)	(Daytime Telephone 8	Jumber)
Enclosed is a check for the following amount	made payable to the Flo	rida Department o	State:	
■ \$35 Filing Fee □\$43.75 Filing Certificate of	g Fee & S43.75 Filing Status Certified Cop (Additional c enclosed)	oy Cert opy is Cert (Add	50 Filing Fee ificate of Status ified Copy litional Copy is losed)	
Mailing Address Amendment Section		Street Address Amendment Sec	tion	

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 of

THE KALEO INSTITUTE INC

(Name of Corporation as curre	ently filed with the Florida Dept. of State)		
N13000002978			
(Document Num	ber of Corporation (if known)		
Pursuant to the provisions of section 617,1006. Florida Statu amendment(s) to its Articles of Incorporation:	ites, this Florida Not For Profit Corporation add	pts the follow	ving
A. If amending name, enter the new name of the corpora	ition:		
NA		The .	пен
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	cation" or "incorporated" or the abbreviation "C	Corp." or "In	ıc. ''
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A		
<u> </u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA		
<u> </u>			
			<u> </u>
D. If amending the registered agent and/or registered of) [
new registered agent and/or the new registered office	→ address: N/A	75 75 75 75 75 75 75 75 75 75 75 75 75 7	
Name of New Registered Agent:	<u>~_/</u>	1011011 11110111 111101111111111111111	1
New Registered Office Address:	(Florida street address)		
	, Florida, Zip Ce	ode)	
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am J		osition.	
	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: X Change X Remove X Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	D	HALLMAN, BRUCE	731 DUVAL STATION RD
Add			SUITE 107-185
Remove			JACKSONVILLE FL 32218
2) Change	D	AHERN, MICHAEL	731 DUVAL STATION RD
Add			SUITE 107-185
X Remove			JACKSONVILLE FL 32218
3) Change	D	BORCHERT, GERALD PhD	731 DUVAL STATION RD
Add			SUITE 107-185
X Remove			JACKSONVILLE FL 32218 C.
4) Change	D	BREWER, MARY JANE F	731 DUVAL STATION RD
X Add			SUITE 107-185 (47)
Remove			JACKSONVILLE FL 32218
5) Change	D	BREWER, CHRISTOPHER K	731 DUVAL STATION RD
$\frac{X}{X}$ Add			SUITE 107-185
Remove			JACKSONVILLE FL 32218
6) Change			
Add			
Pamova			

If amending or adding additional Artic attach additional sheets, if necessary).	nes, enter change(s) (Be specific)	<u>nere</u> :			
N. (A					
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			<u>.</u>		
	 				

Page 3 of 4

	this document was signed.	if other than the
	ective date if applicable:	
	(no more than 90 days after amendment file date)	
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ument's effective date on the Department of State's records.	listed as the
Ado	option 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.	
	6/19/19 Dated	
	Signature X Lenauth Brown	
	(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)	
	KENNETH BREWER	
	(Typed or printed name of person signing)	
	PRESIDENT S	
	(Title of person signing)	**********
	CONTRACTOR	ر. ج