## N13666005812

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## **COVER LETTER**

<sup>2</sup> **TO:** Amendment Section Division of Corporations

NAME OF CORPORATIO	Student ACES  ON:				
	N13000005812			- <del> </del>	
DOCUMENT NUMBER:	<del></del>				
The enclosed Articles of Am	endment and fee are subm	itted for filling.			
Please return all corresponde	nce concerning this matter	to the following:			
Kristin Webb					
	(	Name of Contact Per	son)		
Student ACES Inc.					
		(Firm/ Company)	)		
7755 Cannon Ball Rd					
		(Address)			
Palm Beach Gardens, FL 33	418				
	(	City/ State and Zip C	(ode)		
krissy@studentacesforleade	rship.com				,
E	-mail address: (to be used	for future annual repo	ort notification	1)	Y_
For further information conc	eming this matter, please o	all:			
Krissy Webb		at	850	559-7612	
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Numb	жг)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida D	epartment of !	State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & 【 Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	D Filing Fee icate of Status icd Copy tional Copy is used)	
Mailina A	ddroce	C+=.	not Addross		

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

Student ACES, Inc.		
(Name of Corporation as curre	ntly filed with the Flori	da Dept. of State)
N13000005812		
(Document Num	ber of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Florida Statu- amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not For</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	tion:	
		The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ation" or "incorporated	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>	D)	7.2
C. Enter new mailing address, if applicable:		PE
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		7. <del>1</del> 2
D. If amending the registered agent and/or registered off	ico addross in Marida	ontar the name of the
new registered agent and/or the new registered office		enter the name of the
V. C.W. Destarant I.A. exc		
Name of New Registered Agent:		
<del> </del>	/El.	rida street address)
New Registered Office Address:	(FIG	rida sireei adaress)
	(City)	, Florida (Zip Code)
	(0.137	(infreduc)
New Registered Agent's Signature, if changing Registere		
I hereby accept the appointment as registered agent. I am f	amiliar with and accept i	the obligations of the position.
	Signature of Many Daniet	read Against if changing
	Signature of New Registe	теа луст, у спануту

## 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 De           V         Mike Jo           SV         Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Brian Muller	500 University Blvd #215
Add			Jupiter FL 33458
x Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	(Be specific)				
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	er 16, 2017
The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more th	an 90 days after amendment file date)
Note: If the date inserted in this block does not meet to document's effective date on the Department of State's	he applicable statutory filing requirements, this date will not be listed as the secords.
Adoption of Amendment(s) (CHECK	<u>ONE</u> )
☐ The amendment(s) was/were adopted by the mem was/were sufficient for approval.	bers and the number of votes cast for the amendment(s)
There are no members or members entitled to vot adopted by the board of directors.	e on the amendment(s). The amendment(s) was/were
9/16/17 Dated	
Signature	
·	man of the board, president or other officer-if directors incorporator – if in the hands of a receiver, trustee, or y by that fiduciary)
J.L. Martinez	
(Ту	ped or printed name of person signing)
President	
	(Title of person signing)