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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: KIDS APPLYING BEAL ACTION TOWARDS EXEMPLY	^
DOCUMENT NUMBER: N 13 0 0 0 0 0 7 6 18	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
REGINE BELL (Name of Contact Person)	
KIOS APPLYING REAL ACTION TOWARDS EDUCATION	
355 NE 53RD STREET ADT #4	
Miami, FL 33137 (City/ State and Zip Code)	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
REGINE BELL at (786) 548-1477  (Name of Contact Person) (Area Gode) (Daytime Telephone Number)	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is Enclosed)  Certified Copy (Additional Copy is Enclosed)	
Mailing Address Amendment Section Amendment Section	

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 ently filed with the Florida Dept. of (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: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." "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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: (Florida street address) New Registered Office Address: Florida (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. N A 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 Doe  V Mike Jones  SV Sally Smith		
Type of Action (Check One)	Title Name		<u>Addres</u> s
1) Change Add Remove	BECRETARY MYRMA	KILLBUS	1990 NE 163 ED STREET #218 NORTH 1914MI BLACK, FL 33162
2) _X Change Add	T REGINAL	DANIEL	355 NE 53" STRHET #11 MIAMI, PL 33137
Remove 3) Change Add Remove			
4) Change Add Remove	<del></del>		
5) Change Add Remove		·	
6) Change Add Remove			

(attach additional si	heets, if necessary). (Be	specific)			
NAME	CHANGE	FROM: K	ios applyina	REAL	ACTION
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E. If amending or adding additional Articles, enter change(s) here:

	f each amendme cument was sign	ent(s) adoption: $\frac{4/3/2017}{}$	, if other than the
Effective d	ate <u>if applicable</u>		
		(no more than 90 days after amendment file date)	
		this block does not meet the applicable statutory filing requirements, this date will the Department of State's records.	I not be listed as the
Adoption	of Amendment(s	(CHECK ONE)	
	mendment(s) was ere sufficient for	s/were adopted by the members and the number of votes cast for the amendment(s) approval.	
	are no members ed by the board o	or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.	
	Dated	04-03-2017	
	have	the chairman of the board, president or other officer-if directors e not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)	<del></del>
	-	REGINE BELL (Typed or printed name of person signing)	
	_	PRESIDENT (Title of person signing)	