## N13000010732

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

MEDICAL CAR	REER ACADEMY, IN	C.	
N13000010732 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are	submitted for filing.	<del>-</del>	
Please return all correspondence concerning this n	•		
ROCHELLE E GOLDBERG	_		
	(Name of Contact	Person)	
MEDICAL CAREER ACADEMY, INC.			
	(Firm/ Compa	ny)	
7741 N MILITARY TRAIL, SUITE 4/5			
	(Address)		
PALM BEACH GARDENS, FL 33410			
	(City/ State and Zi	p Code)	
ROCHELLE@MCAEDU.ORG			
E-mail address: (to be u	ised for future annual i	eport notificatio	n)
or further information concerning this matter, ple	ase call:		
ROCHELLE E GOLDBERG		(561) it	249-6461
(Name of Contact Pers	son)	(Arca Code)	(Daytime Telephone Number)
inclosed is a check for the following amount made	e payable to the Florida	a Department of	State:
■ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Statu		Certif is Certif	9 Filing Fee icate of Status ied Copy tional Copy is used)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	7. []	treet Address mendment Secti fivision of Corpo the Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

MEDICAL CAREER ACADEMY, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N13000010732 (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 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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:  $N/\Lambda$ (Florida street address) New Registered Office Address: . Florida (City) (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: X Change X Remove X Add	PT         John Do           V         Mike Jo           SV         Sally St	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>DCFO</u>	CATHY A WALDRON	
x Remove			<u> </u>
2) × Change Add	<u>VCOOD</u>	ROCHELLE E GOLDBERG	7741 N MILITARY TRAIL. SUITE 4/5
Remove 3 ) Remove × Add Remove	<u>SD</u>	TIFFANY N PALERMO-SKAWSKI	PALM BEACH GARDENS, FL 3: 7741 N MILITARY TRAIL SUITE 4/5 PALM BEACH GARDENS, FL 3:
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
	<u>-</u> -		

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The date of each amendment(s) adoption:	if other than the
Effective date if applicable: MAY 5, 2021	
(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.	

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Dated Signatu	re
	TINA PALERMO
	(Typed or printed name of person signing)
	PRESIDENT, CEO, DIRECTOR

■ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.