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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATE	IMPACT ACADEM ON:	Y SCHOOL INC			
DOCUMENT NUMBER:	PT-100000E1 to 12	14000	0002	087	
The enclosed Articles of An	nendment and fee are subr	nitted for filing.			
Please return all correspond	ence concerning this matte	er to the following:			
Leila Ros					
		(Name of Contact P	erson)		
AEGIS Law					
		(Firm/ Compan	y)		
615 Channelside Drive, Sui	te 207				
		(Address)			
Tampa, FL 33602					
		(City/ State and Zip	Code)		, 5
rwalk@aegislaw.com					
	-mail address: (to be used	for future annual re	port notification	n)	
For further information con	cerning this matter, please	call:			
Leila Ros		21	813	999-0199 ext 111	• . •
	(Name of Contact Person)	a((Area Code)	(Daytime Telephone	: Number):
Enclosed is a check for the	following amount made pa	yable to the Florida	Department of	State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

IMPACT ACADEMY SCHOOL INC

(Documer	nt Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	la Statutes, this Florida Not For Profit Corporation adopts the	ne following
A. If amending name, enter the new name of the c	corporation:	
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	'corporation" or "incorporated" or the abbreviation "Corp.'	The new ' or "Inc."
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>(98</u>)	
D. If amending the registered agent and/or registe new registered agent and/or the new registered	ered office address in Florida, enter the name of the l office address:	., .
Name of New Registered Agent:		
	(Florida street address)	
	(City) . Ftorida (Zip Code)	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	gistered 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	$\frac{PT}{V}$ \underline{SV}	John Do Mike Jo Sally St	<u>mes</u>	
Type of Action (Check One)	Title		Name	Address
1) Change Add		_		
Remove				
2) Change Add		_		
Remove		_		
4) Change Add		_		
Remove				s.
5) Change Add		_		<u> </u>
Remove				
6) Change Add		_		
Remove				
E. If amending or additional sheet			icles, enter change(s) here: (Be specific)	
Article III shall be amend	led as fol	lows:		
Replace the first paragrap	oh in its e	ntirety w	ith the following language:	
"Impact Academy's missi	ion and p	urpose is	s to provide a place where children, young add	alts in transition and families are
happy to belong and reas	sured wit	h positiye	e and frequent evonmunication. To ensure the	at both academic and personal life
skills are taught with an o	exception	al level o	f love and professionalism. To facilitate a nur	turing and safe environment while

aligning ourselves with other co	mmunity programs. To recognize the differences in eac	th child's ability and set goals and
assessments accordingly. To pro-	ovide group home and other services to post school agec	d adults to enable a safe and
productive transition into adult	ife."	
The second paragraph shall ren	ain unchanged.	
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		11.00
		,
The date of each amendment(date this document was signed.	s) adoption: August 28, 2023	, if other than the
	mmediately	
	(no more than 90 days after amendment file a	late)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requ Department of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes castroval.	it for the amendment(s)

There are no members or members entitled to vote on the amendment(s), adopted by the board of directors.	The amendment(s) was/were
August 29, 2023	

Dated

Ci (Aug 30, 2023 13 12 EDT)

Signature

(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)

Collette Stibich	an sianian
(Typed or printed name of person	on signing)
Vice President and Secretary	
(Title of person sign	