

N14000004901

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

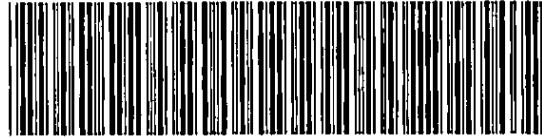
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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18 JUL 20 AM 9:39

JUL 23 2018

S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 9, 2018

IRAID~~A~~ LOEHRIG  
SCHOOLIFEUSA, INC  
1838 EDGEWATER DRIVE  
BOYNTON BEACH, FL 33436

SUBJECT: SCHOOLIFEUSA, INC.  
Ref. Number: N14000004901

We have received your document for SCHOOLIFEUSA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The incorporator(s) cannot be amended or changed. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young  
Regulatory Specialist II

Letter Number: 918A00014043

RECEIVED  
18 JUL 20 PM 2:38  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301

SchoollifeUSA, Inc.

4858 Sable Pine Circle

West Palm Beach

Florida 33417

Date: June 29, 2018

Re: **Acknowledgement of modified terms**


To whom it may concern:

Reference is made to the Document No. N14000004901 between us dated on June 29, 2018. This letter will acknowledge that the contract is modified and superseded by the following change in terms listed on pages 2 and 3 of 4 in the enclosed documents of Articles of Amendment for Non-Profit Organization- SchoollifeUSA, Inc.

The remaining terms of the contract are unchanged by this agreement.

I, Jack Wells, acknowledge that unless it is notified to the contrary, in writing within 10 days of receipt of this letter, it shall accept the above described modifications as agreed to by both parties, Jack Wells & Iraida Loehrig, and shall hold our agreement to encompass these new terms. For further questions please contact me at 561-543-1770.

Sincerely,

A handwritten signature in black ink that reads "Jack D Wells". The signature is written in a cursive, flowing style.

Jack Wells

**COVER LETTER :**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Schoolifeusa, inc.

DOCUMENT NUMBER: N1400000 4901

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Traida Loehrig  
(Name of Contact Person)

Schoolife Usa, inc.  
(Firm/ Company)

1838 Edgewater Dr.  
(Address)

Boynton BEACH, FLORIDA 33436  
(City/ State and Zip Code)

SimplytheTruthministries@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Traida Loehrig at 561 - 704 - 3638  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|--|--|--|--|

**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

Schoolifeusa, inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N 14000004901

(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:

*The new 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.*

B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

1838 Edgewater Dr.  
Boynton Beach, FL 33436

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

1838 Edgewater Dr.  
Boynton Beach, FL 33436

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:

Irada Loehrig

1838 Edgewater Dr.

(Florida street address)

New Registered Office Address:

Boynton Beach

(City)

Florida

33436

(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.*

Irada Loehrig

Signature of New Registered Agent, if changing

FILED  
18 JUL 20 AM 9:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TR</u>	<u>Jack Wells</u>	<u>4858 Sable Pine Circle Villa A</u> <u>West Palm Beach, Florida</u> <u>33417</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Iraida Loehrig</u>	<u>1838 Edgewater Dr.</u> <u>Brynton Beach, Florida</u> <u>33436</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>C</u>	<u>Bob Urciuoli</u>	<u>6460 S.W. Thistle Terrace</u> <u>Palm City, Florida</u> <u></u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Michael Armfield</u>	<u>130 Chilean Ave.</u> <u>Palm Beach, Florida</u> <u>33480</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Teresita L. Alvarez</u>	<u>4858 Sable Pine Circle Villa A</u> <u>West Palm Beach, Florida</u> <u>33417</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Erica Carlson</u>	<u>326 Newport V.</u> <u>Deerfield Beach, Florida</u> <u>33442</u>

E. If amending or adding additional Articles, enter change(s) here:  
(attach additional sheets, if necessary). (Be specific)

~~Article X: Incorporator - Iraida Loehrig, 1838 Edgewater Drive  
Boynton Beach, FL 33436~~

Article XI: Registered Officer and Agent -  
Iraida Loehrig, 1838 Edgewater Drive  
Boynton Beach, FL 33436

Article XII: Initial Principal Place of Business of Corporation  
1838 Edgewater Drive  
Boynton Beach, Florida 33436

The date of each amendment(s) adoption: 6/29/18, if other than the date this document was signed.

Effective date if applicable: immediately  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption 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.

Dated 6/29/18

Signature Jack D Wells  
(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)

Jack Wells  
(Typed or printed name of person signing)

Founder  
(Title of person signing)