N1400000 1793

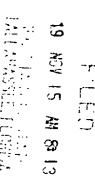
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations The Elevation Foundation, Inc. NAME OF CORPORATION: N14000007793 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Scott Lee (Name of Contact Person) **Elevation Scholars** (Firm/ Company) 201 E. Pine St., suite 200 (Address) Orlando, FL 32801 (City/ State and Zip Code) slee@theelevationfoundation.org E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Scott Lee 407 215-1355 (Name of Contact Person) (Daytime Telephone Number) (Area Code) Enclosed is a check for the following amount made payable to the Florida Department of State: ¥\$52.50 Filing Fee □ \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is 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

		01		
The Elevation Foundation, Inc.				
(Name of Corporation	as curren	tly filed with the Florida Dept. of State)		
N14000007793				
(Docum	ent Numb	er of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Flori amendment(s) to its Articles of Incorporation:	ida Statute	s, this Florida Not For Profit Corporation	adopts the following	
A. If amending name, enter the new name of the	corporati	on:		
Elevation Scholars, Inc			The new	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ion" or "incorporated" or the abbreviation		
B. Enter new principal office address, if application	ole:	201 E. Pine St. suite 200		
(Principal office address <u>MUST BE A STREET AI</u>		<u>S</u>) Orlando, FL 32801		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B) D. If amending the registered agent and/or registered agent and/or the new registered Name of New Registered Agent:	tered offic		<u></u> -	
	201 F. Pin	e St., suite 200		
		(Florida street address)		
New Registered Office Address:	Orlando		22901	
	Oriando	, Floric		
New Registered Agent's Signature, if changing Relation I hereby accept the appointment as registered agent.	. I am fan	Agent:	19 19	

Page 1 of 4

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.

<u>X</u> F	nple: Change Remove Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type (Che	e of Action ck One)	Title	<u>Name</u>		Address
1) _	Change		_	 ,	
	Add				
_	Remove				
2) _	Change				
_	Add				
_	Remove				
3)_	Change				
_	Add				
_	Remove				_
4) _	Change		_		
_	Add			_	
_	Remove				
5)	Change				
_	Add				-
	Remove				
6)	Char				
y) <u> </u>	Change				
_	Add				
	Remove				

f amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)	
		
		
		
-1-1-1-		
# · ·		
	100	

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90) days after amendment file date)	
Note: If the date inserted in this blo- document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date woartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s).	s)
☐ There are no members or members adopted by the board of directors	pers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
Dated 10/3/2019		
Signature	es See	
(By the chain	man or vice chairman of the board, president or other officer-if directors	
	in selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
Scott Lee		
	(Typed or printed name of person signing)	
President		
	(Title of person signing)	