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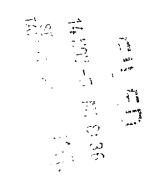
		
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Prison Life Education Inc.	
DOCUMENT NUMBER: 47-2068652 WHDDDDD 92.7	8
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Patrick Johnson	
(Name of Contact Person)	
Prison Life Education Inc.	
(Firm/ Company)	
22735 Tradewind Rd	
(Address)	
Boca Raton, FL 33428	
(City/ State and Zip Code)	
prisonlifeeducationinc@gmail.com	3
E-mail address: (to be used for future annual report notification)	1 marrie
For further information concerning this matter, please call:	7-14 1-14 1-14
Patrick Johnson at 201 706-1005	(p '*** ; r.a
(Name of Contact Person) (Area Code & Daytime Telephone Number)	号 の
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee 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
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

Prison Life Education Inc.			 		
(Name of Corporation as currently	filed with the Flo	orida Dept. of State)			
47-2068652	VIHDODE	209218			
(Docum	nent Number of Co	orporation (if known)			
Pursuant to the provisions of section 617.10 amendment(s) to its Articles of Incorporation		es, this <i>Florida Not For Profit Corporati</i>	on adopts the i	following	g
A. If amending name, enter the new nam	e of the corporati	ion:			
NA				The new	,
name must be distinguishable and contain t		tion" or "incorporated" or the abbreviat	ion "Corp." o		
"Company" or "Co." may not be used in the	<u>he name</u> .				
B. Enter new principal office address, if		NA			
(Principal office address MUST BE A STR	REET ADDRESS				
C. Enter new mailing address, if applica		NA			
(Mailing address <u>MAY BE A POST OI</u>	FFICE BOX)			,	
			5-10	\ \	
				Ö	1
D. If amending the registered agent and/ new registered agent and/or the new to			<u>f the</u>	1	1.9 -96
	NA	indiress.		(31	-
Name of New Registered Agent:	INA .		٠		
_			·	က က	•
New Registered Office Address:		(Florida street address)	Çin	တ	
HEW REGISTER Office Plant CSS.	,		2.*		
-	(City)	, Florida	Cr. C. L.		
	(Cuy)		(Zip Code)	1	
New Registered Agent's Signature, if cha			*4b = *4* -		
I hereby accept the appointment as register	ea ageni. Tam fa	тинаг wun ana ассері ine obugations of	ine position.		
	Ciamature - CM	Registered Agent if changing			
	NUMBER OF NEW	REVISIETEG AVENT II COGNUINV			

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.

Example: X_Change X_Remove X_Add	V Mik	n Doe te Jones ty Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	ABM	Nancy Thornton	19000 S.W. 377th Street
Add			Florida City, Florida 33034-6409
X Remove			
2) Change	<u></u>	 	
Add			3 7
Remove			
3) Change	-		
Add			デース <u>デース</u>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u> </u>
Remove			
6) Change			
Add			
Remove			

E. <u>If amending or adding additional Art</u> (attach additional sheets, if necessary).	(Be specific)		
NA			•
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	e date of each amendment(s) adoption:e this document was signed.	, if other than the	
Eff	Effective date if applicable:		
	(no more than 90 days after amendment file date)		
Ado	option 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.		
	November 1, 2014		
	Signature Patrik Jahrson	_	
	(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)		
	Patrick Johnson		
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		