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R. WHITE

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN PEER TUTORS INC

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TABLAHASSEE, ELONILA

Articles of Amendment to
Articles of Incorporation of

PEER TUT	ORS INC		
(Name of C	rporation as currently flied with the Flo	rida Dept. of State)	
N1400001	0244	•	
	(Document Number of Co	rporation (if known)	
	visions of section 617.1006, Florida Statute Articles of incorporation:	s, this Plorida Not For Profit Corpora	tion adopts the following
A. Hamending n	me, enter the new name of the cornerat	<u>00:</u>	
			The new
name must be disti "Company" or "C	guishable and cortain the word "corporate" may not be used in the name.	lon" or "incorporated" or the abbrevi	ation "Corp." or "Inc."
B. Enter new pris	etpal office address, if applicable:	,	
(Principal office a	des MUST BE A STREET ADDRESS		
		 	
	hing address, if applicable;		
(Mauing addre	MAY BE A POST OFFICE ROX	· ,	
D. If amending th	e registered apont and/or registered offic	e address in Florida, enter the name	of the
	ment and/or the new registered office a		
Name of N	law Registered Agent:		
		••	
Mr. Bear		(Florida street address)	
<u>New Ked</u>	istered Office Address:		
	(City)	, Florida	m . a . t .)
			(Zip Code)
New Registered A	eent's Signature, if changing Replaced appointment as registered agent. I om fa	<u>Agent:</u> ultar with and accept the obligations o	f the position.
THE STATE OF THE S		·····	· · · · • • · · · · · · · · · · · · · ·
	Signature of New	Registered Agent, if changing	
	1	= + +	

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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and
sadress 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= Dristee; 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. Prezident, 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, hike Joiles 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 Sully Smith. SV as an Add.

Example: X Change X Remove X Add	V Mik	n <u>Doe</u> te Jones y Smith	
Type of Action (Check One)	<u>/jde</u>	Name	Address
1)Cbenge	D	TYLER GOTTLIEB	715 HARRISON STREET
X			HOLLYWOOD FL 33021
Removo		•	·
2)Chango			
Add			
Remove			*1,***
3) Change			
Remove			
4) Change			
Add			
Remove	·		
5)Change	<u></u>		· · ·
Add			
Remove		•	
6)Change			
Add			
Remove		Page 2 of 4	

amending (r adding additional Articles, entered alsocis, if necessary). (Be spec	<u>r change(s) here;</u>	
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Page 3 of 4

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11-06-14;03:40PM; ELLIOTTS BUSINESS

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The date of each amendment(s) adoptions NOVEMBER 6TH 2014 , if other than the date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the members and the number of votes cost for the amendment(s) war/were sufficient for approval. There are no thereburs or members entitled to vote on the amendment(s). The amendment(s) was/were subgred by the board of directors. NOVEMBER 6TH 2014 Date Signature (By the clauman 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) MATTHEW GEIMER (Typed or printed name of person signing) PRESIDENT (Title of person signing)

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