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> MAY 1 4 2020 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: The Metropal	HAN INTERNATIONER SCHOOL OS		
NAME OF CORPORATION: The Metropol	scher Or demissylan: CO.		
DOCUMENT NUMBER: <u>12150000015</u>	<u> </u>		
The enclosed Articles of Amendment and fee are submitted for t	filing.		
Please return all correspondence concerning this matter to the fo	llowing:		
Stace Zurz (Name of	2.04		
(Name of	Contact Person)		
(Firm	/ Company)		
3965 DW 2	nd Ave		
(A	Address)		
Missan', FL	33127		
(City/ Stat	e and Zip Code)		
St. ACCy 24230	annual report notification)		
E-mail address: (to be used for future	annual report notification)		
For further information concerning this matter, please call:			
Stacy Zuazo	at 307 785-6402 (Area Code) (Daytime Telephone Number)		
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)		
Enclosed is a check for the following amount made payable to the	e Florida Department of State:		
Certificate of Status Certified	onal copy is Certified Copy		
Mailing Address Amendment Section	Street Address		
Division of Corporations	Amendment Section Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

The Mexopolitane (Name of Corporation as currently filed with the	Torida D	ept. of Sta	+ 1000	50 S	Chool	090 (CEO)	$\frac{1}{m}$	00 G 1500
2100000714				• ` ` `	~	-		
		er of Corpo	ration (if l	(nown)				
Pursuant to the provisions of section 617.1006, Flori amendment(s) to its Articles of Incorporation:	ida Statute	s, this <i>Floi</i>	rida Not F	or Profit (Corporation	adopts the	e follow	ring
A. If amending name, enter the new name of the	corporati	on:						
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.	"corporat	ion" or "in	corporate	Cnd of or the	wer Pabbreviation	CAA	The nor "Inc	1,07
B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET AL)			C 3			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>80X</u>)	Sa	us	25	Sla	ne	-	
D. If amending the registered agent and/or regist	tered offic	anddrass	in Florida	anter th	e name of t	ha		
new registered agent and/or the new registere			III FIOI IQZ	ZUA	·	iic.		
Name of New Registered Agent:			1	290			<u> </u>	_
New Registered Office Address:		<u>, r.</u>		lorīda street				
-	le	(City)			, Florid (Zip	ia <u>3</u> Code)	19)	于
New Registered Agent's Signature, if changing Relatively accept the appointment as registered agent.			and accep	t the oblig	ations of the	position.		
	_	~~_						
	Sig	nature of	New Regis	icred Agei	ıı, if changir	ายู		
		,	·		,		2020 / PR 30	
							PH 3: 33	
						: :: :	ယ်	

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 = Ch. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officheld. 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 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 Char Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X.Change X.Remove X.Add	PT John I V Mike SV Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>A</u> <7	Maria Isabella	34P2 00 9 20 50 20 100 100 100 100 100 100 100 100 100
Remove 2) Change Add	Sec	Lerois Olsen	3467 mc 3rd Aug 3467 mc 3rd Aug
Remove Change Add Remove	VP	roclla vicent	20100 25 100100 Deg 20
4) \nearrow Change Add	Ples	DIANA LOVA	29/2 ~ 20/20 19/2 ~ 20/20 19/20 ~ 20/20
Remove 5) Change Add	VP	Rebecca Depino	14/20 00 2cg
Remove 6) Change Add			
Remove E. If amending or add (attach additional shi	ling additional Ar	ticles, enter change(s) here: (Be specific)	
	, y//-		
			<u>.–</u>

		
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The date of each amendment(s) adoption:	9-1-2020	, if other than
date this document was signed.	-	
non de la companya de		
Effective date if applicable:	more than 90 days after amendment file de	nuc)
<u>Note:</u> If the date inserted in this block does not document's effective date on the Department of		rements, this date will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast	for the amendment(s)

Dated 4-25-30
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)
(Typed or printed name of person signing)
(Title of person signing)

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