# NI5000009301

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Amendacine

JAN 26 2016

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#### **COVER LETTER**

ambis Temple Summer Camp Corp. NAME OF CORPORATION: 15000009307 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) (Firm/ Company) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

## Mailing Address

TO: Amendment Section

Division of Corporations

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

Art	ticles of Incorporation of			
Lamb's Temple	2 Summer	Camp Corp.		
(Name of Corporation as cu		Florida Dept. of State)		
N 15000	009307			
(Document N	lumber of Corporation (	if known)		
Pursuant to the provisions of section 617.1006, Florida St amendment(s) to its Articles of Incorporation:	tatutes, this Florida Not	For Profit Corporation adopts the following		
A. If amending name, enter the new name of the corp	oration:			
<u>Lambis Temple</u>	Learning	Center Inc. The new		
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incordor	ated" or the abbreviation "Corp." or "Inc."		
B. Enter new principal office address, if applicable:				
(Principal office address <u>MUST BE A STREET ADDRI</u>	ESS)			
	<del></del>			
C. Enter new mailing address, if applicable:		7.5		
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )				
D. If amending the registered agent and/or registered	affice address in Flori	ide enter the name of the		
new registered agent and/or the new registered off		man, enter the name of the		
Name of New Registered Agent:		ince o		
		-		
	(Florida street address)			
New Registered Office Address:				
		, Florida		
	(City)	(Zip Code)		
New Registered Agent's Signature, if changing Registe	ered Agent:			
I hereby accept the appointment as registered agent. I a	m familiar with and acc	ept the obligations of the position.		
<del></del>	Signature of New Re	gistered Agent, if changing		
		o 1.6***** 1/ ******************************		

# 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	PT John I V Mike I SV Sally S	<u>Jones</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	D	Dana Gilcrease	157 Peters Rd
Add			Midway, H.
Remove			33343
2) Change			
Add			enning temperature
Remove			
3) Change		<u> </u>	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			<del></del>
Add			
Remove			
6) Change			<u></u>
Add			
Remove			

amending or addi ach additional she		ш <i>тур</i> . (L	o apecific)					
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The	he date of each amendment(s) adoption:	, if other than the
date	ate this document was signed.	
Effe	ffective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
Not doc	ote: If the date inserted in this block does not meet the applicable statutory filing requirement ocument's effective date on the Department of State's records.	s, this date will not be listed as the
Ado	doption of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the was/were sufficient for approval.	amendment(s)
A	There are no members or members entitled to vote on the amendment(s). The amendment(adopted by the board of directors.	(s) was/were
	Dated 1-20-16	
	Signature Lana Milesease	
	(By the chairman or vice chairman of the board, president or other office have not been selected, by an incorporator – if in the hands of a receive other court appointed fiduciary by that fiduciary)	
	_ Dana Cilcrease	
	(Typed or printed name of person signing)	
	(Title of person signing)	