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TO: Amendment Section Division of Corporations

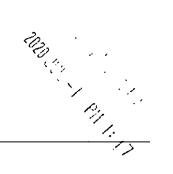
Sout NAME OF CORPORATION:	th Walton Academy, Ir	IC.			
	001226FEI				
DOCUMENT NUMBER:					
The enclosed Articles of Amendment	and fee are submitted fo	r filing.			
Please return all correspondence conc	erning this matter to the	following:			
Calley Middlebrooks					
	(Name	of Contact Person))		
South Walton Academy, Inc.					
•••••	(Fir	m/ Company)			
305 Mack Bayou Road					
		(Address)		- · · · · · · · · · · · · · · · · · · ·	
Santa Rosa Beach, FL 32459					
	(City/ S	tate and Zip Code))	-	
southwaltonacademy@gmail.com					
E-mail add	ress: (to be used for futu	re annual report no	otification)	-	
For further information concerning th	is matter, please call:				
Calley Middlebrooks		850 at		213-4595	
(Name of	Contact Person)		a Code) (Daytime Telephone Ni	ımber)
Enclosed is a check for the following	amount made payable to	the Florida Depar	tment of St	ate:	
■ \$35 Filing Fee □\$43.7: Certit	icate of Status Certif	ied Copy tional copy is	Certified	nte of Status I Copy mal Copy is	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



South Walton Academy, Inc.

(Name of Corporation as currently filed with the Florida N16000001226FEI	<u>Sept. (A Gente</u>)
(Document Num	ber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	ites, this Florida Not For Profit Corporation adopts the followi
A. If amending name, enter the new name of the corpora	ution:
name must be distinguishable and contain the word "corpor" "Company" or "Co." may not be used in the name.	The ne ation" or "incorporated" or the abbreviation "Corp." or "Inc.
B. Enter new principal office address, if applicable:	305 Mack Bayou Road
(Principal office address MUST BE A STREET ADDRESS	Santa Rosa Beach, FL 32459
C. Enter your mailing address if applies black	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	305 Mack Bayou Road
	Santa Rosa Beach, FL 32459
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	
Name of New Registered Agent:	
	į
New Registered Office Address:	(Florida street address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am for	
	Signature of New Registered Agent, if changing

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	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	nes	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>D</u>	_	Swift, Kristin	137 Old Ferry Road Santa Rosa Beach, Ft. 32459
× Remove				
2) Change Add		_		
Remove 3) Change Add Remove		_		
4) Change Add		_		
Remove				
5) Change Add		-		
Remove				
6) Change Add		_		
Remove				
E. If amending or addir (attach additional shee			cles, enter change(s) here: (Be specific)	
				<u> </u>
				
			-	

	
	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(n	to more than 90 days after amendment file date)
Note: If the date inserted in this block does document's effective date on the Departmen	not meet the applicable statutory filing requirements, this date will not be listed as the t of State's records.
Adoption of Amendment(s) (<u>CHECK ONE</u>)
The amendment(s) was/were adopted b was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
06/26/2020 Dated
Signature Alle
(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)
Calley Middlebrooks
(Typed or printed name of person signing)
President
(Title of person signing)