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R. WHITE BUY 21 2011

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N: <u>Innovat</u>	ive Champion	Academy		
•			1		
DOCUMENT NUMBER: _	N 10000005	208			
The enclosed Articles of Ame	endment and fee are sub	mitted for filing.			
Please return all corresponder	nce concerning this matt	er to the following:			
	Artavio	a Smith			
		(Name of Contact Person	n)		
	Inc	CVative Cham (Firm/Company)	npion Academy		
		(Jp,	J		
	22	(Address)	TR.		
		(Address)			
		Miam: Fl. 3	3 <i>D</i> 56		
		Miami, FL · 3. (City/ State and Zip Cod	e)		
	s.art	avia a ya hoo.	com		
E-	mail address: (to be use	for future annual report	notification)		
For further information conce	rning this matter, please	call:			
Artavi	a Smith	at _ 	786) 402-9047		
(Name of Contact Persor		rea Code) (Daytime Telephone Number)		
Enclosed is a check for the fo	Howing amount made p	ayable to the Florida Depa	artment of State:		
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)		
Mailing Address Amendment Section			Street Address Amendment Section		

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

FILED

17-NOV 20 AM 10: 16:

Innovative Champ	ion Academic Fine
(Name of Corporation as curren	ntly filed with the Fforida Dept. of State) Will A
N1600000 5208	
	ber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	tion:
N/A	The new
name must be distinguishable and contain the word corpord "Company" or "Co." may not be used in the name.	The new ution" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	,
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office and agent and agent. Name of New Registered Agent:	
rame of the neglitic carriers.	
New Registered Office Address:	(Florida street address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered liberary 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		Doe 2 Jones 2 Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	M	Clifford J Harris III	2208 N.W 172 TR.
Add			<u>.</u>
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Ai (wtach additional sheets, if necessary).	(Be specific)				
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			<u> </u>	 	

The date of each amendment(s) adoption: 11/14/17 date this document was signed.	, if other than th
Effective date if applicable: N/A (no more than 90 days after am	endment file date)
Note: If the date inserted in this block does not meet the applicable statute document's effective date on the Department of State's records.	ry filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the number was/were sufficient for approval.	of votes cast for the amendment(s)
There are no members or members entitled to vote on the amendment adopted by the board of directors.	(s). The amendment(s) was/were
Dated	
Signature <u>Orlano Init</u>	<u> </u>
(By the chairman or vice chairman of the board, pro- have not been selected, by an incorporator – if in to other court appointed fiduciary by that fiduciary)	
Artavia Sm (Typed or printed name	of person signing)
(Typed of printed name	or person signing,
Presic	rson signing)
(Title of per	son signing)