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(F	Requestor's Name)
(/	Address)
(/	Address)
(0	City/State/Zip/Phone #)
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(1	Business Entity Name)
(!	Document Number)
Certified Copies	Certificates of Status
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2021 SEP -7 PH IO: OO

COVER LETTER

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Division of Corporations	
NAME OF CORPORATION: 104TH ADUCKTURE LEADER SHIP OF CA	D.
DOCUMENT NUMBER: N160000 0£744 ". INC	`
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
STEPHER H MOTTUTAT	
(Name of Contact Person)	
/F:/ C	
211 M. NEW WARRINGTON ROOD (Address)	
(Address)	
PENSACULA FL 32506 (City/ State and Zip Code)	
(City/ State and Zip Code)	
SHMPEHS @ GMAIL. COM	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
STEPHEN H. MATTUTAN at (C50) 5-72-3673 (Name of Contact Person) (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 Florida Department of State: (ALRYON) Pain)
□ S35 Filing Fee □ S43.75 Filing Fee & □ S43.75 Filing Fee & □ S52.50 Filing Fee	,
Mailing Address Amendment Section Amendment Section	

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

TO: Amendment Section

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

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: YOUTH ADVEN	TURE LEADERSHIP ACA	ADEMY INC
DOCUMENT NUM	BER: N16000006774		
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	STEPHEN H MATTUTAT		
		Name of Contact Perso	n
		Firm/ Company	
	211 NORTH NEW WARRIN	NGTON ROAD	
		Address	
	PENSACOLA, FL 32506		
		City/ State and Zip Cod	c
	SHMPENS@GMAIL.COM		
		sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
STEPHEN H MATTU	JTAT	850 at (572-3673 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made		
☐ \$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)
Amo Divi	ling Address andment Section sion of Corporations Box 6327	Amend Divisio	Address Iment Section In of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: 10 WTH ADULTUTE LEBOCISHIP ACADEMY, THE DOCUMENT NUMBER: N 16000006774
NAME OF CORPORATION: (OUTH MOUNTUIL CEROS SHIP TO CADE IN)
DOCUMENT NUMBER: N 1600006774
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
STEPHEN H. MATTHERT
Name of Contact Person
Firm/ Company
308 WEST GOVERNORT STREET
308 WEST GUVELLATENT STREET PEHSTOCOLD FL 32502 City/ State and Zip Code
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
STEPHICIS H. MATTUTAT at (850) 572 3673
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Certificate of Status Certified Copy Certificate of Status
(Additional copy is certified Copy enclosed) (Additional Copy is enclosed) (Additional Copy is enclosed)
Mailing Address Amendment Section Street Address Amendment Section
Division of Corporations Division of Corporations The Contract of Table to the contract of t
P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Amendment to

FILED

Articles of Incorporation of

2021 SEP -7 PH 10: 00

Name of Corporation as currently filed with the	LEBAC	151318	ACADE SEPTEMAY OF S
(Name of Corporation as currently filed with the	Florida Dept.	of State)	
N 1600000678	74		,
(Docum	ent Number of	Corporation (if kn	nown)
Pursuant to the provisions of section 617,1006, Flor amendment(s) to its Articles of Incorporation:	ida Statutes, th	is Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the YO IN THE STILL N name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.	Corporation"	B UILD or "Incorporated	On the abbreviation "Corp " or "Inc."
B. Enter new principal office address, if applical	ole:	SANT	
(Principal office address MUST BE A STREET AL	DDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E		Spyr	
D. If amending the registered agent and/or registered agent and/or the new registered	tered office ad ed office addre	dress in Florida,	enter the name of the
Name of New Registered Agent:	50n.		
		(Fh.	orida street address)
New Registered Office Address:	ς ₋ -		
	Sp.) \	, Florida
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	egisterad Age	nt:	·
_	Signati	ure of New Registe	ered Agent, if changing

(Attach additional sheets, if necessary) Please note the officeridirector 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 John Doc X Remove Mike Jones X Add Sally Smith Type of Action Title Name <u>Addres</u>s (Check One) 1) ____ Change ____ Add ____ Remove Change ____ Add ___ Remove 3) ____ Change ____ Add ____ Remove 4) ____ Change ____ Add ____ Remove 5) ____ Change ____ Add _____Remove δ) ____ Change ____ Add ____ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

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:

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	71			
	. /.			
The date of each amendment(s) adoption: _ late this document was signed.	N N more than 90 days afte			, if other than the
Offective date <u>if applicable</u> :	N /A			
ра партисарие,	more than 90 days afte	r amendment jile dat	e)	
Note: If the date inserted in this block does no locument's effective date on the Department of	ot meet the applicable s			t be listed as the
	HECK ONE)			

The amendment(s) was were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

ŭ.	lopted by the board of directors.
	Dated
	Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if the the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	TERESE COUNS (Typed or printed name of person signing)