Meadobuns

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900316855649

08/13/18--01827--012 **95.88

AUG 15 2018 S. YOUNG



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	VENTURE EDUCA ON:	TION FOUNDAT	ION, INC.	
DOCUMENT NUMBER:	N16000006775			
The enclosed Articles of An				
Please return all correspond	ence concerning this matte	er to the following:		
Brian Yacker, JD/CPA				
		(Name of Contact	Person)	
YH Advisors, Inc.				
<u>-</u>		(Firm/ Compa	ny)	
7755 Center Ave Suite 1225	;			
		(Address)		
Huntington Beach, CA 926-	1 7			
		(City/ State and Zip	p Code)	· ·
byacker@yhadvisors.com				
E	-mail address: (to be used	for future annual r	eport notification	on)
For further information conc	erning this matter, please	call:		
Brian Yacker, JD/CPA		;	(310) at	982-2803
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pa	yable to the Florida	a Department of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)	Certi r is Certi (Add	50 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Address		Street Address		

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 to Articles of Incorporation of

VENTURE EDUCATION FOUNDATION, INC.

(Name of Corporation as cu	rrently filed with the Flo	orida Dept. of State)		
N16000006775				
(Document N	lumber of Corporation (if	known)		
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	eatutes, this Florida Not F	For Profit Corporation adopts the following		
A. If amending name, enter the new name of the corp	oration:			
FLORIDA VENTURE EDUCATION FOUNDATION, I	NC.	The new		
name must be distinguishable and contain the word "corp" "Company" or "Co." may not be used in the name.	poration" or "incorporate			
B. Enter new principal office address, if applicable:	N/A			
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u></u>			
		18 18 18 18 18 18 18 18 18 18 18 18 18 1		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	AUG I		
in the second se		βή α Π Γ α Ω		
		2: 50 COND		
D. If amending the registered agent and/or registered		a, enter the name of the		
new registered agent and/or the new registered off	ice address:			
Name of New Registered Agent: N/A				
		Florida street address)		
New Registered Office Address:				
N/A		, Florida		
	(City)	(Zip Code)		
New Registered Agent's Signature, if changing Registed hereby accept the appointment as registered agent. I as		ot the obligations of the position.		
	Signature of New Regi	stered 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: XChange X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sr	<u>ones</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s
1) Change	N/A	_		_	
Add				_	
Remove				_	
2) Change		_		_	
Add				_	
Remove				_	
3) Change					
, Add					
Remove				_	
4) Change					
		_			
Add Remove				_	
5) Change					
Add		_			
Remove				_	
6) Change				_	
Add					
Remove				_	· · · · · · · · · · · · · · · · · · ·

(attach additional sheets, if necessary). (Be specific)						
/Λ						
						
					<u> </u>	
	 ·					
-						
<u>.</u>	 					
					 :	
					.	
		<u></u> .	<u></u>	<u> </u>	<u>. </u>	
						
,						
	· · · · · · · · · · · · · · · · · · ·					
<u>. </u>	<u></u>					
						
		-		·= -		
						

	e date of each amendment(s) adoption:	_, if other than the
date	e this document was signed.	
Eff	ective date if applicable:	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be turnent's effective date on the Department of State's records.	e listed as the
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated 08/07/18	
	Signature Park : Schneider	
J	(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)	-
	Pat Schneider	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	