## N17000002055

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (Δα                     | ddress)            |           |
| . (^0                   | iuress)            |           |
| (Ac                     | ldress)            |           |
|                         |                    |           |
| (Cit                    | ty/State/Zip/Phone | e #)      |
| PICK-UP                 | ☐ WAIT             | MAIL      |
|                         |                    |           |
| (Bu                     | isiness Entity Nan | ne)       |
| · (Do                   | ocument Number)    |           |
| `                       | ,                  | •         |
| Certified Copies        | _ Certificates     | of Status |
|                         |                    |           |
| Special Instructions to | Filing Officer:    |           |
| i                       |                    |           |
|                         |                    |           |
|                         |                    |           |
|                         |                    |           |
|                         |                    |           |
|                         |                    |           |

Office Use Only



900299410529

05/18/17--01013--005 \*\*35.00

FILED

17 MAY 18 PH 6: 26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 1 8 2017 S. PRATHER

## **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF CORPORATIO             | The AEA Education F                           | oundation Inc  | <u> </u>                              |  |
|--------------------------------|---|--|---------------------------------------|--|
|                                | N17000002035                                  |  |                                       |  |
| DOCUMENT NUMBER: _             |   |  | •                                     |  |
| The enclosed Articles of Ame   | endment and fee are subm                      | itted for filing.  |                                       |  |
| Please return all corresponde  | nce concerning this matter                    | to the following:  |                                       |  |
| Kenneth Roberson               |   |  |                                       |  |
| •                              | (   | Name of Contact Per  | rson)                                 |  |
| The AEA Education Founda       | tion Inc                                      |  |                                       |  |
| <u>.</u>                       |   | (Firm/ Company)  | ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; | <del> </del>   |
| 6831 NW 29th Ave               |   |  |                                       |  |
|                                |   | (Address)  |                                       |  |
| Miami, Florida 33147           |   |  |                                       |  |
|                                | (4  | City/ State and Zip C  | ode)                                  |  |
| p.allensr@theaeafoundation.    | org   |  |                                       |  |
| E                              | mail address: (to be used t                   | or future annual repo  | ort notification                      | )  |
| For further information conce  | erning this matter, please c                  | all:   |                                       |  |
| Patrick Allen                  |   | at   | 404                                   | 832-5038   |
|                                | Name of Contact Person)                       |  | (Area Code)                           | (Daytime Telephone Number)                           |
| Enclosed is a check for the fo | llowing amount made pay                       | able to the Florida D  | epartment of S                        | State:   |
| ■ \$35 Filing Fee              | □\$43.75 Filing Fee & □ Certificate of Status | 3\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | Certifi<br>Certifi                    | Filing Fee cate of Status ed Copy ional Copy is sed) |
| Mailing A                      | idress  | Stre   | et 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

The AEA Education Foundation Inc (Name of Corporation as currently filed with the Florida Dept. of State) N17000002035 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co," may not be used in the name. 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 MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 | PT         John D           V         Mike J           SV         Sally S | ones                               |                          |
|-----------------------------------|---|------------------------------------|--------------------------|
| Type of Action<br>(Check One)     | <u>Title</u>  | Name                               | <u>Addres</u> s          |
| 1) Change                         | <u>v</u>  | The Allen Family Charitable Remain | 19821 NW 2nd Ave         |
| Add                               |   |                                    | #416                     |
| X Remove                          |   | •                                  | Miami, Florida 33169     |
| 2) Change                         | <u>v</u>  | Andeen Russell                     | 3320 NW 42nd Street      |
| X Add Remove                      |   |                                    | Ft. Lauderdale, Fl 33309 |
| 3) Change                         |   |                                    |                          |
| Remove 4) Change Add Remove       |   |                                    |                          |
| 5) Change Add                     |   |                                    |                          |
| Remove                            |   |                                    |                          |
| 6) Change                         |   |                                    |                          |
| Add                               |   |                                    |                          |
| Remove                            |   |                                    |                          |

| E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) |             |       |           |     |  |
|---|-------------|-------|-----------|-----|--|
|   |             |       |           |     |  |
|   | •           |       |           |     |  |
|   |             |       |           |     |  |
|   |             |       |           |     |  |
|   |             |       |           |     |  |
|   |             |       |           |     |  |
|   |             |       |           |     |  |
|   |             |       |           |     |  |
|   |             |       |           | *** |  |
|   |             |       |           |     |  |
|   |             |       | **        |     |  |
|   |             |       | · · · · · |     |  |
|   | -           |       |           |     |  |
|   |             |       |           |     |  |
|   |             | ···   |           |     |  |
|   |             |       |           |     |  |
|   |             |       |           |     |  |
|   |             |       | <u></u>   |     |  |
|   |             |       | -         |     |  |
|   |             | · · · |           |     |  |
|   | <del></del> |       |           |     |  |
|   |             |       |           |     |  |

|     | e date of each amendment(s) adoption:  | , if other than the |
|-----|--|---------------------|
| 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 nument's effective date on the Department of State's records.  | ot be listed as the |
| Ade | 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 May 12, 2017   |                     |
|     | Signature All Molecular Signature  | <u></u>             |
|     | (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) |                     |
|     | Kenneth Roberson   | 17 k                |
|     | (Typed or printed name of person signing)  | AR NOTE TO          |
|     | Chief Executive Officer  | SAY BUT             |
|     | (Title of person signing)  | D 6: 26             |