N17000004392

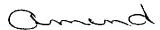
| (Red | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL. |
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·· COVER LETTER

| Division of Corporations | · |
|---|-------------------|
| NAME OF CORPORATION: Nuts for Education Inc. | - |
| DOCUMENT NUMBER: N17000001392 | _ |
| The enclosed Articles of Amendment and fee are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | |
| Timothy J. Jeanty (Name of Contact Person) | - |
| Nuts For Education Inc. (Firm/ Company) | - |
| 2555 Dolphin Olive (Address) | - |
| Delray Beach, FL 33445 (City/ State and Zip Code) | ي سائد سائد |
| Nots for Education Inc @ gmail. com E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: Timothy J. Jeanly at 561 859 7730 | |
| Timothy J. Jeanly at 561 859 7738 5 (Area Code) (Daytime Telephone Number) | SKOLIV |
| Enclosed is a check for the following amount made payable to the Florida Department of State: | |
| \$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) | |

Mailing Address

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

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

Articles of Amendment

to

Articles of Incorporation of

| Nuts for Education (Name of Corporation as c N17000004392 (Document | Inc. | | |
|---|-------------------------------------|--|----------|
| (Name of Corporation as o | currently filed with the Fl | orida Dept. of State) | |
| N170000004392 | | | |
| (Document | Number of Corporation (if | known) | |
| ursuant to the provisions of section 617.1006, Florida smendment(s) to its Articles of Incorporation: | Statutes, this <i>Florida Not</i> a | For Profit Corporation adopts the follow | ving |
| . If amending name, enter the new name of the cor | poration: | | |
| | | The r | |
| ame must he distinguishable and contain the word "co Company" or "Co." may not be used in the name. | rporation or "incorpora | ed or the abbreviation Corp. or In- | c. |
| | | | |
| . Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDR | RESS) | | — |
| | | | |
| | | | |
| | . | | — |
| Enter new mailing address, if applicable: | 3 | 77 | |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u> | - | | , |
| | | | <u>.</u> |
| | | • : | 2 |
| | | .1 | |
| If amending the registered agent and/or registere new registered agent and/or the new registered or | | a, enter the name of the | <u></u> |
| new registered agent and/or the new registered o | ince audress. | | 70 |
| Name of New Registered Agent: | | | |
| | | (Florida street address) | |
| New Registered Office Address: | | | |
| | | , Florida | |
| | (City) | (Zip Code) | |
| Dunish and Amenda Circumstance (Calcarda Day | stand tooms | | |
| ew Registered Agent's Signature, if changing Regis hereby accept the appointment as registered agent. 1 | | pt the obligations of the position. | |
| | J | | |
| | | | |
| | Signature of New Reg | istered 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 Jones Smith | |
|-----------------------------------|--------------|-----------------------|---------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| 1) Change | | Nazha Nasfin | |
| AddRemove | | | |
| 2) Change | | Jason Sternberg | |
| Add Remove | | | |
| 3) Change Add | | Kalvaince V. Die | Boca Roton FL |
| Remove | | | 33433 |
| 4) Change Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| . If amending or adding additiona | l Articles, enter o | change(s) here: | | | | |
|--|---------------------|-----------------|--------------|---------------------------------------|-------------|--|
| (attach additional sheets, if necessor | ary). (Be specifi | ic) | | | | |
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| The date of each amendment(s) add late this document was signed. | ption: | , if other than the |
|---|--|----------------------|
| | | |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this bloc locument's effective date on the Dep | k does not meet the applicable statutory filing requirements, this date will artment of State's records. | not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were add was/were sufficient for approval | opted by the members and the number of votes east for the amendment(s) | |
| There are no members or members adopted by the board of director | ers entitled to vote on the amendment(s). The amendment(s) was/were s. | |
| Dated 8/4 | /17 | |
| have not bee | nan of vice chairman of the board, president or other officer-if directors in selected, by an incorporator – if in the hands of a receiver, trustee, or oppointed fiduciary by that fiduciary) | |
| Time | Thy J. Tearty (Typed or printed name of person signing) | |
| Presid | lent, Chu. rman, CEO (Title of person signing) | |