MIDDOUY

(Re	questor's Name)
(Ado	dress)
(Add	dress)
(City	y/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu:	siness Entity Name)
(Do	cument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:





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JUL 13 2017 S. YOUNG



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Kids Kastle Acc	ademy Corp			
DOCUMENT NUMBER: N1700004409				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Kevin P. Herring (Name of Connet Person)				
Kids Kastle Academ				
3638 Evans Ave. (Address)	, <u>,</u>			
F+ Mycrs F1.33901 (City/ State and Zip Code)				
Katexs & Katexs. com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Kevin Herring at (Area (Area)	780) 908 - UUU7 Code) (Daytime Telephone Number)			
Enclosed is a check for the following amount made payable to the Florida Department of State:				
S35 Filing Fee S43.75 Filing Fee Scrifficate of Status Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)			
Mailing Address Street A	ddress			

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

Kids Kastle Academy Corp.

(Name of Corporation as currently filed with the Florida Dept. of State)

<u> 117000004409</u>

(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 corners	ition:
name must be distinguishable and contain the word "cornor	The new ation" 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:	3638-42 Evans Ave.
(Principal office address <u>MUST BE A STREET ADDRESS</u>	Ft Myers F1.33901
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3038-42 Evans Ave
	F+ Myers F1.33901
	9
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	address:
Name of New Registered Agent:	evin D. Herring:
_ <u> </u>	918 St Charles St
New Registered Office Address:	(Florida street address)
_	+ Myers Florida 33914
	(City) (Zip Code) CT
New Registered Agent's Signature, if changing Registere	
I hereby accept the appointment as registered agent. I am j	amiliar with and accept the obligations of the position.
-5	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 I V Mike SV Sally 9	<u>Jones</u>	
Type of Action (Check One)	Title	Name	Address
Change Add Remove	<u>vp</u>	Brandon L. Pope	2918 St Charles St. Ft Myers F1 33916
2) Change Add	VP	Iristine E. Pope	3408 Franklin St. Ft Myers F1 33916
Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

If amending or ade attach additional sh	neets, if necessary).	(Be specific)	ange(s) here:				
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The date of each amendment(s) adoption:	7-6-2017	Apri124,2017	_, if other than the
date this document was signed. Effective date if applicable:	July 10, 2017		
(r	no more than 90 days after amendmen	t file date)	
Note: If the date inserted in this block does document's effective date on the Department		g requirements, this date will not be	e listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of vote	es cast for the amendment(s)	
There are no members or members enti- adopted by the board of directors.	tled to vote on the amendment(s). The	: amendment(s) was/were	
Dated <u>July 1</u>	0,2011		
have not been select	vice chairman of the board, president of ted, by an incorporator – if in the hand ed fiduciary by that fiduciary)		-
K	(Typed or printed name of pers		
	President		

(Title of person signing)