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COVER LETTER

TO: Amendment Section Division of Corporations

The Acade NAME OF CORPORATION:	my Of Excellence INC			·	
DOCUMENT NUMBER:				7.17.4	
The enclosed Articles of Amendment and fe	e are submitted for filing				
Please return all correspondence concerning	this matter to the followi	ng:			
Kenneth Stephens					
	(Name of Cont	act Person)			
The Academy of Excellence					
	(Firm/ Cor	прапу)			
217 N. Kirkman Road					
	(Addre	ss)			
Orlando, Florida 32811					
	(City/ State and	Zip Code)			
theexcellenceacademy2017@gmail.com					
E-mail address: (to be used for future annu	al report not	ification	n)	
For further information concerning this matt	er, please call:				
Kenneth Stephens		321 at		662-9847	
(Name of Conta	et Person)		Code)	(Daytime Telephone Num	iber)
Enclosed is a check for the following amour	nt made payable to the Flo	rida Departr	nent of	State:	
□ \$35 Filing Fee □\$43.75 Filing Certificate of		ŋy	Certifi Certifi	D Filing Fee icate of Status ied Copy tional Copy is used)	
Mailing Address Amendment Section		Street Ad Amendme	 .	on	

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

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

Articles of Amendment to Articles of Incorporation of

The Academy of excellence INC (Name of Corporation as currently filed with the Florida Dept. of State) N17000006534 (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: N/A 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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: Kenneth Stephens Name of New Registered Agent: 217 N. kirkman road (Florida street address) New Registered Office Address: Florida 32811 Orlando (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)

And the second second

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 <math>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 V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	P	Jackie Stephens	217 N. Kirkman Rd Orlando, Fl 32811
× Remove			·
2) Change Add	<u>P</u>	Kenneth Stephens	217 N. Kirkman Rd Orlando, Fl 32811
Remove 3) Change Add Remove			
4) Change Add		_	
Remove			
5) Change Add	·		
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		onal Articles, enter change(s) here: ssary). (Be specific)	
· 			
-		Wat to	

The date of each amendment(s) adoption:		if other than th
	-	

(CHECK 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.

Adoption of Amendment(s)

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 3/22/23 Signature Lease The Reshers
(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 Stephens (Typed or printed name of person signing)
Fresident
(Title of person signing)