N17000012678

(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



200342277912

03/31/20--01005--011 **35.00



Amend

APR 1" 2020 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION	MLC LEARNING C	ENTER I, INC		
N' DOCUMENT NUMBER:	17000012678			
The enclosed Articles of Amer	ndment and fee are subr	mitted for filing.		
Please return all correspondence	ce concerning this matte	er to the following	;;	
TAWANA MCCRAW				
		(Name of Contac	t Person)	· · · · · · · · · · · · · · · · · · ·
MLC LEARNING CENTER	I, INC			
		(Firm/ Comp	any)	
1414 N PINE HILLS ROAD				
		(Address)	
ORLANDO, FL 32808				
		(City/ State and Z	(ip Code)	
ITSTAWANA@YAHOO.CO	M			
E-m	all address: (to be used	for future annual	report notification	n)
For further information concern	ning this matter, please	call:		
TAWANA MCCRAW			407 at	272-7787
(N	ame of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the foll	owing amount made pa	yable to the Flori	da Department of	State:
≘ \$ 35 Filing Fee □	\$43,75 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional copenclosed)	Certif y is Certif	D Filing Fee icate of Status ied Copy tional Copy is sed)
Mailing Add Amendment Division of C P.O. Box 632	Section Corporations		Street Address Amendment Secti Division of Corpo The Centre of T	rations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

MLC LEARNING CENTER I. IN:	ИL	C.	LE,	ARNI	NG	CEN	TER	1	INC
----------------------------	----	----	-----	------	----	-----	-----	---	-----

	es of Amendment to s of Incorporation of	Man All Eller
MLC LEARNING CENTER I, INC		Maria By
(Name of Corporation as currently filed with the Florida l	Dept. of State)	
N17000012678		
(Document Numb	er of Corporation (if kno	own)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	<u>ion:</u>	
name must be distinguishable and contain the word "corpora. "Company" or "Co." may not be used in the name.	tion" or "incorporated"	or the abbreviation "Corp," or "Inc."
B. Enter new principal office address, if applicable:	1414 N PINE HILLS	ROAD
(Principal office address MUST BE A STREET ADDRESS	ORLANDO, FL 3280	8
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1414 N PINE HILLS	ROAD
	ORLANDO, FL 32808	3
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a		nter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Flor	ida street address)
<u></u>		, Florida
•	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far	Agent: niliar with and accept th	e obligations of the position.
Si	gnature of New Register	ed 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 Do V Mike Jo SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove Add Remove		<u></u>	
4) Change Add			
Remove		-	
5) Change Add			
Remove		_	
6) Change Add			
Remove		_	
E. If amending or addin (attach additional sheet	g additional Arti s, if necessary).	cles, enter change(s) here: (Be specific)	
<u> </u>			

•		
		
		
		
		
		 _
		
		
		
		
date this document was signed.	on:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	-
Note: If the date inserted in this block do document's effective date on the Departm	nes not meet the applicable statutory filing requirements, this date will not be nent of State's records.	e listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopte was/were sufficient for approval.	d by the members and the number of votes cast for the 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.
	03-23-2020 Dated
	Signature Tawana McCraw
	(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)
	TAWANA MCCRAW
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)