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MAY 2 4 2018
S. YOUNG

# COVER LETTER

TQ: Amendment Section Division of Corporations

NAME OF CORPORATION: Progressive Life International Christian Academy INC.
DOCUMENT NUMBER: NISO0000 44460
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mrs. Gail Plummer (Name of Contact Person)
(Firm/ Company)
2255 Florida AVE. South (Address)
ST. Peters burg, FLorida 33705 (City/ State and Zip Code)
ricky of under 60 roll and 1 - Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mrs. Gail Plummer at (727) 520 - 2013 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  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

## - Y-1 - Y-1

## Articles of Amendment to Articles of Incorporation of

# PROGRESSIVE LIFE INTERNATIONAL CHRISTIAN ACADEMY INC

(Name of Corporation as curren	tly filed with the Flor	ida Dept. of State)	
N18000004660	373 3 3701		
(Document Numb	er of Corporation (if k	nown)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not Fo</i>	r Profit Corporation adopts the fol	lowing
A. If amending name, enter the new name of the corporat	ion:		
			he new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated	l" or the abbreviation "Corp." or '	'Inc "
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS	)	<b>温</b> 食	တ
			===
		<u> </u>	
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C. Enter new mailing address, if applicable:		Fit is	بب
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	
		<u></u>	
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D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a		enter the name of the	
Name of New Registered Agent:			
	(Florida street address)		
New Registered Office Address:			
···		, Florida	
	(City)	(Zīp Code)	
New Registered Agent's Signature, if changing Registered			
I hereby accept the appointment as registered agent. I am fa	miliar with and accept	the obligations of the position.	
S	ignature of New Regisi	ered 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	<u>PT John I</u> <u>V Mike .</u> <u>SV Sally S</u>	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	_P	Gail Harper	600 40Th ST. North ST. Petersburg FL:
2) Change Add Remove	<u>P</u>	Ricky Plummer	3656 29Th AUE. South ST. Petersburg FL 33711
3 ) Change Add Remove			
4) Change Add Remove		·	
5) Change Add Remove		·	
6) Change Add Remove			

f amending or adding additional Arti ttach additional sheets, if necessary).	(Be specific)				
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The date of each amendment(s) addate this document was signed.	loption:	, if other than the
Effective date <u>if applicable</u> :	5/14/18	<del></del>
	(no more than 90 days after amendment file	date)
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requestrement of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE)</u>	
The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes cas	t for the amendment(s)
There are no members or members adopted by the board of directors	bers entitled to vote on the amendment(s). The ame	endment(s) was/were
Dated 5	114/18	
	. Licky Phimmes	
have not bee	man or vice charman of the board, president or oth en selected, bytan incorporator — if in the hands of a appointed fiduciary by that fiduciary)	ner officer-if directors a receiver, trustee, or
	1. Ricky Plumer (Typed or printed name of person sign	enine)
	DWNEr/President	
	(Title of person signing)	