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Certified Copies	_ Certificate	s of Status
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### **COVER LETTER**

TO: Amendment Section Digision of Corporations

NAME OF CORPORATION: National School Improvement Foundation
DOCUMENT NUMBER: NISTER OF STATE OF STA
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Fersons)
(Firm/ Company)
5419 Grand Caynan Rd
Jacksunille Fl. 32226
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at 904 5047799  (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed)  \$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Street Address

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

Artic	les of Incorporation of	
National School Imp	· · · · · · · · · · · · · · · · · · ·	-Oundation Inc
All SC Chick of	X CX CXC2 ( -	riorida Dept. or state)
(Document Num	nber of Corporation	of known)
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	utes, this <i>Florida No</i>	t For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor The Mation School School name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	<del></del>	rent Academy In the new rated" or the abbreviation "forp," or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>S</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		18 SEP -
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		ida, enter the name of the
Name of New Registered Agent:		<b>買</b> で
		(Florida street address)
New Registered Office Address:		
		, Florida
	(Ciţv)	(Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am		cept the obligations of the position.
<del></del>	Signature of New Re	egistered 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>V</u> <u>N</u>	ohn Doe fike Jones ally Smith		
Type of Action (Check One)	Title	<u>Name</u>		Address
1) Change				
Add				
Remove				
2) Change		· <del>*</del>		
Add				
Remove				\
3) Change				
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4) Change			<del>:</del> :	
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5) Change				
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Remove				<del>-</del>
6) Change				
Add				
Remove			D 1.54	<del></del>

amending or adding	g additional Articles, enter ch	ange(s) here:	
ttach additional sheel	s, if necessary). (Be specific)		
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The date of each amendment(s) adoption: _ date this document was signed.	Sept 13, 2018	, if other than the
Effective date if applicable:	more than 90 days after amendment file date)	
	of meet the applicable statutory filing requirements, this date will no	ot be listed as the
Adoption of Amendment(s) $(\underline{C}$	CHECK ONE)	
☐ The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)	
There are no members or members entitle adopted by the board of directors.	ed to vote on the amendment(s). The amendment(s) was/were	
Dated Signature	13,7018	
(By the chairman or vie have not been selected	ce chairman of the board, president or other officer-if directors d, by an incorporator if in the hands of a receiver, trustee, or fiduciary by that fiduciary)	
<del></del>	(Typed or printed name of person signing)	
<del></del>	The Director (Title of person signing)	