N18 0000 10577

(Red	questor's Name)	
(Add	lress)	•
(Add	iress)	
		- <u></u>
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	ilina Officer:	
	9	ı
		ı

Office Use Only



800341511858

03/05/20--01008--027 **35.00

7020 HAR -5 PM 3: 50

Amend

MAR 2 2020 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	al Education Collabo	rative, Inc.		
DOCUMENT NUMBER:	•			
The enclosed Articles of Amendment and fee a	re submitted for filin	ıg.		
Please return all correspondence concerning the	is matter to the follow	ving:		
Melissa Gross-Arnold, Esq., B.C.S.				
	(Name of Co	ntact Person)		
Arnold Law Firm				
	(Firm/ C	ompany)		
6279 Dupont Station Court				
	(Add	ress)		
Jacksonville, FL 32003				
	(City/ State a	nd Zip Code)		
melissa@arnoldlawfirmllc.com				
E-mail address: (to	e used for future ani	nual report notif	ication)
For further information concerning this matter,	please call:			
Melissa Gross-Arnold, Esq., B.C.S.	·	904 at		731-3800
(Name of Contact	Person)	(Area C	Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount m	ade payable to the F	lorida Departme	ent of S	State:
	Fee & □\$43.75 Fili	ng Fee & opy copy is	l\$52.50 Certific Certific	Filing Fee cate of Status ed Copy ional Copy is
Mailing Address Amendment Section		Street Add	iress	

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 of

Florida Special Education Collaborative, Inc.		
(Name of Corporation as curr	ently filed with the Flor	idn Dept. of State)
N18000010577		
(Document Nu	mber of Corporation (if kr	nown)
Pursuant to the provisions of section 617.1006, Florida Statemendment(s) to its Articles of Incorporation:	tutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:	
·		The new
name must be distinguishable and contain the word "corpo "Company" or "Co," may not be used in the name.	oration" or "incorporated	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>ss</u>)	50. 30
1		
		
C. Enter new mailing address, if applicable:		
(Malling address MAY BE A POST OFFICE BOX)		
		ب 🧦 💮
	· · · · · · · · · · · · · · · · · · ·	
D. If amending the registered agent and/or registered of	ffice address in Florida.	enter the name of the
new registered agent and/or the new registered offic	e address:	Sites the frame of the
Name of New Registered Agent:		
		orida street address)
New Registered Office Address:	,,,	orida succi diduress)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register	and Ament.	•
hereby accept the appointment as registered agent. I am	eu Agent; familiar with and accent	the obligations of the position
	,	sunganors of the position.
	Signature of New Regist	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,	• nd
address of each Officer and/or Director being added:	#110

(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 <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	PT Jol	hn Doe	
$\frac{X}{X}$ Remove $\frac{X}{X}$ Add		ke Jones	
<u>/1</u> /100	<u> 3 v 3a</u>	lly Smith	
Type of Action	<u>Title</u>	Name	<u>Addres</u> s
(Check One)		ļ	
	_	1	
i) Change	D	Kim Cavanah	2327 Armistead Road
4.11			Tallahassee, FL 32308
Add		·	Tallinassee, 1 E 32306
X Remove			
		•	
2) X Change	P	Christy Noe	2327 Armistead Road
2)Change		1	
Add		†	Tallahassee, FL 32308
D		ł	
Remove		1	
3) Change	∨ P	Kimberly Steinke	417 Enclave Place
х			Lakeland EL 22002
Add		4	Lakeland, FL 33803
Remove		i	
		ì	
4) Change	T	Barbara Myrick	621 Kensington Place
X			
Add Add		i	Wilton Manors, FL 33305
Remove		i i	
Kemove		1	
	S	Channey Target	
5) Change		Shannon Treece	43265 Treadway Drive
X Add			Babcock Ranch, FL 33982
Remove			
6) Change		1	
			<u> </u>
Add			
Remove			

If amending or adding additional Articated additional sheets. if necessary).	(Be'specific)
	
	
	I.
	
	1
	i
	,

т.	June 20, 2019	
i ne iate	e date of each amendment(s) adoption:e this document was signed.	if other than the
effi	ective date if applicable:	
	(no more than 90 days after amendment file date)	
Not doc	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ument's effective date on the Department of State's records.	listed as the
Add	option of Amendment(s) (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.	
	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 3-2-2020	
	Signature	
	(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)	
	Christine Noe	
	(Typed or printed name of person signing)	
	Board President	
	(Title of person signing)	