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(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

Reslience Education Reslience Reslie	on and Training Institute, Inc.
N18000011778	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are st	ubmitted for filing.
Please return all correspondence concerning this ma	natter to the following:
Edoardo Naggiar	
	(Name of Contact Person)
Reslience Education and Training Institute, Inc.	
	(Firm/ Company)
2432 Pretty Bayou Island Drive	
	(Address)
Panama City, FL 32405	
	(City/ State and Zip Code)
enaggiar@resilience-reti.org AND p.barry@sbcglo	obal.net
E-mail address: (to be us	sed for future annual report notification)
For further information concerning this matter, plea	ase call:
Ed Naggiar	850 319-5267
(Name of Contact Pers	
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	
24 111	C

Mailing Address

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

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

Articles of Amendment Articles of Incorporation of

Resilience Education and Training Institute, Inc. (Name of Corporation as currently filed with the Florida Dept. of State)

N18000011778

(Docum	nent Number of Corpor	ation (if known)	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Flori</i>	da Not For Profit Corporation	adopts the following
A. If amending name, enter the new name of the	e corporation:		
N/A			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		corporated" or the abbreviation	
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A			
			<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i>) N/A		JUN
			9 PH 9
D. If amending the registered agent and/or regis		n Florida, enter the name of t	STATE 9
new registered agent and/or the new register	ed office address:		
Name of New Registered Agent:	Edoardo Naggiar		
	2432 Pretty Bayou Isl	and Drive	
New Registered Office Address:		(Florida street address)	
	Panama City	, Florid	da <u>32405</u>
	(City)	(Zi _I	o Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent		and accept the obligations of the	e 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)

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 Sn	nes	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>D</u>	Joshua Cotton	3824 Cedar Springs Road Dallas, TX 75219
 X Remove 2) Change Add 	<u>D</u>	Jim Cunningham	88 Overlook Drive Miramar Beach, FL 32550
X Remove	CCEOD	Edoardo Naggiar	2432 Pretty Bayou Island Drive Panama City. FL 32405
4) Change x Add	SD	Patrick Barry	2250 San Marco Drive Los Angeles, CA 90068
Remove 5) Change × Add	<u>D</u>	Cassandra Naggiar	2432 Pretty Bayou Island Drive Panama City, FL 32405
Remove 6) Change × Add	D	Tommy Ford	3421 Highway 77 Panama City, FL 32405
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	

Additional sheet for Section D, Page 4

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:

Type of	f Action	Title	Name	Address
x	Change Add Remove	D	Jim Curry	5813 River Drive Lorton, VA 22079

<u></u>	
	
- 	
The date of each amendment(s) adopt date this document was signed.	ion:, if other than the
-	
Effective date if applicable:	(no more than 90 days after amendment file date)
Note: If the date inserted in this block document's effective date on the Depart	loes not meet the applicable statutory filing requirements, this date will not be listed as the ment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopt was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)

adopted by the boar	d of directors.
Dated _	24 June 2023
Signature _	Pao Baj
(E	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)
	Patrick Barry
	(Typed or printed name of person signing)
	Director / Secretary
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were