N19000001242

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Consist tentoralism As	F::: O#:	
Special Instructions to	Filing Officer:	

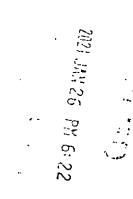




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MAR 10 2021 S. YOUNG



COVER LETTER

TO: Amendment Section Division of Corporation	ns			4 °	
NAME OF CORPORATION		Schools of Florida, I			
	N19000001242				
DOCUMENT NUMBER:			· - ·		
The enclosed Articles of An	nendment and fee are sub	mitted for filing.			
Please return all corresponde	ence concerning this matt	er to the following:			
Jack Climer					
		(Name of Contact Pe	erson)	· · ·	
Chair, Classical Education 5	Schools of Florida, Inc.				
		(Firm/ Company	·)		
12304 Talayera Woods Trai	il,				
		(Address)			
Riverview, FL. 33579					
		(City/ State and Zip	Code)		
_		(City/ State and Zip	code)		
jack.climer@gmail.com					
<u> </u>	-mail address: (to be used	I for future annual rep	ort notification	n)	
For further information conc	erning this matter, please	call:			
Jack Climer		at	417	773-3677	
	(Name of Contact Person	<u> </u>	(Area Code)	(Daytime Telephone Num	ber)
Enclosed is a check for the f	ollowing amount made p	ayable to the Florida	Department of	State:	
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certi s Certi (Add	0 Filing Fee leate of Status led Copy tional Copy is osed)	
Mailing A Amendme Division o P.O. Box 6	nt Section f Corporations	An Di	reet Address nendment Sectorision of Corp e Centre of 1	orations	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Classical Education Schools of Florida, Inc.

(Name of Corporation as currently filed with the Florida I	Dept. of State)		_
N19000001242			
(Document Numb	er of Corporation (if know	n)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Pr	ofit Corporation adopts the f	ollowing
A. If amending name, enter the new name of the corporat	ion:		
			The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" of	the abbreviation "Corp," or	r "Inc."
B. Enter new principal office address, if applicable:	12304 Talavera Woods T	rail	<i>ج</i> ا
(Principal office address MUST BE A STREET ADDRESS	Riverview, FL. 33579		(-2
			型2
	-		C
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	12304 Talavera Woods T	rail	15
	Riverview, FL. 33579		PH 6: 22
		-	2
12. 15		ab of ab -	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		er the name of the	
Name of New Registered Agent:			
	(Florida	street address)	
New Registered Office Address:			
	// 22)	, Florida (Zip Code)	
	(City)	(z.tp Coae)	
New Registered Agent's Signature, if changing Registered		Alternation of the Automorphism	
I hereby accept the appointment as registered agent. I am far	miliar with and accept the i	obligations of the position.	
	gnature 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	<u>PT</u> <u>Y</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	Jack Climer	12304 Talavera Woods Trail Riverview, FL. 33579
Remove			
2) Change	D	Rob Hartman	Appollo Beach Fl 33572
Remove 3 Change <u>^ Add</u> Remove	D	Mary Hartman	Appollo Beach Fl 33572
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. <u>If amending or add</u> in (attach additional shee		onal Articles, enter change(s) here: essary). (Be specific)	
			<u> </u>

	.
	
	
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
January 22, 2021	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no document's effective date on the Department of State's records.	ot be listed as the
Adoption 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. Vanuary 22, 202/
Signature (By the chairman of 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)
Jack C Climer
(Typed or printed name of person signing)
Chairman

(Title of person signing)