N19000002605

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Append.
4/11/19
DC

COVER LETTER

TO: Amendment Section Division of Corporations				,
NAME OF CORPORATION	Milestones 4 Life L N:	earning Nook, Inc.		
DOCUMENT NUMBER: _	N19000002605			
The enclosed Articles of Ame.	ndment and fee are sub	mitted for filing.		
Please return all corresponden	ce concerning this matte	er to the following:		
Tongla Brown-Pickett				
		(Name of Contact F	Person)	
Milestones 4 Life Learning N	look, Inc.			
		(Firm/ Compan	ıλ.)	
8389 Geoffrey Court				
		(Address)		
Jacksonville, FL 32244				
		(City/ State and Zip	Code)	
milestones4life@att.net				
E-n	nail address: (to be used	for future annual re	port notification)
For further information concer	ming this matter, please	call:		
Tongla Brown-Pickett		31	(904)	993-9402
1)	Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the fol	lowing amount made pa	yable to the Florida	Department of S	State:
■ \$35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certifi is Centifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ai Di CI 26	reet Address mendment Sectivision of Corpo ifton Building 61 Executive Coullahassee, FL 32	rations enter Circle
	Co Nepty	orleadered a	From MA	stone try

Articles of Amendment to Articles of Incorporation of

FILED

	OI	2013 MAR 29 AM
Milestones 4 Life Learning Nook, Inc.	_	SFF&ntrance
(Name of Corporation as c	urrently filed with the Florida Dep	SECRETARY U.S. TALLAHASSEE
19000002605		wa25FF
(Document)	Number of Corporation (if known)	
rsuant to the provisions of section 617,1006, Florida Stendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit	Corporation adopts the following
If amending name, enter the new name of the corr	porațion:	
		The new
me must he distinguishable and contain the word "con Company" or "Co." muy not be used in the name.	rporation" or "incorporated" or the	e abbreviation "Corp " or "Inc."
Enter new principal office address, if applicable:	FCC \	
rincipal office address <u>MUST BE A STREET ADDR</u>	E33)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	:	
(Huming dadiess MAT BE AT UST UTTICE BUA)		
If amending the registered agent and/or registered	Laffice address in Flarida enter t	he nume of the
new registered agent and/or the new registered of		ne name of the
Name of New Registered Agent:		

	(Florida sire	et address)
New Registered Office Address:		
		. Florida
	(City)	(Zip Code)
Desistand Apart's Countries if should Desist	tarod Amenti	
w Registered Agent's Signature, if changing Regist wereby accept the appointment as registered agent. I a		gations of the position.
	,	· ·
	Signature of New Registered Av	ent, 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:

9043538490

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>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	Tara Gaines	1074 Lake Dr.
Add			Lake City, FL 32055
X Remove			
2) Change	GC	Danita Pinckney	2713 Eventide Dr.
Add			Jacksonville, FL 32209
X Remove			
3) X Change	DTD	Tongla Brown-Pickett	8389 Geoffrey Court
Add			Jacksonville, FL 32244
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(anuch	enging or adding additions an additional sheets, if necess	ary). (Be specific)	e(s) nere.		
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	March 6, 2019	:e - st st st
The date of each amendment	(s) adoption:	, if other than the
date this document was signed.		
	March 6, 2019	
Effective date if applicable:	(no more than 90 days after amendment file date)	, <u> </u>
Note: If the date inserted in th document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	nt be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) proval.	
There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.	
Marci Dated	7, 2019	
Signature (Youla Brown- Tueball	
(By the	chairman or vive chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
To	ngla Brown-Pickett	
	(Typed or printed name of person signing)	
Pre	esident	
	(Title of person signing)	