## N1900000 4271

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	LIGHTHOUSE	ACADEMY INC.	
DOCUMENT NUMBER:		000004271	
The enclosed Articles of Amendment and f		ជូ.	
Please return all correspondence concerning	this matter to the follow	/ing:	
	HECTOR SA	NCHEZ	
	(Name of Cor	ntact Person)	
	LIGHTHOUSE ACA	DEMY INC.	
	(Firm/ Co	ompany)	
	6990 VISTA PAR	K BLV	
	(Add	ress)	
	ORLANDO, FL 32	829	
<del></del>	(City/ State ar	nd Zip Code)	
HECTOR'	SANCHEZ-19 to be used for future and	500 GMA	ALL.COM
For further information concerning this mat	ter, please call:		
HECTOR SANCHE	Z	407	885-5268
(Name of Cont	act Person)		e) (Daytime Telephone Num
Enclosed is a check for the following amoun	it made payable to the Fl	lorida Department o	of State:
■ \$35 Filing Fee □\$43.75 Fili Certificate	ng Fee & □S43.75 Filis of Status Certified Co (Additional enclosed)	opy Cer copy is Cer (Ad	2.50 Filing Fee tificate of Status tified Copy Iditional Copy is closed)
Mailing Address		Street Address	<u>s</u>

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



2019 500

## LIGHTHOUSE ACADEMY INC.

(Name of Corporation as of	currently filed with the Florida Dept. of State)
N1900	000004271
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not For Profit Corporation</i> adopts
A. If amending name, enter the new name of the cor	poration:
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated" or the abbreviation "Cor
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADD</u> )	RESS )
C. Enter new mailing address, if applicable:	4
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	<i></i>
D. If amending the registered agent and/or registere	ed office address in Florida, enter the name of the
new registered agent and/or the new registered o	·—·
Name of New Registered Agent:	
N 0 1 1 1405 411	(Florida street address)
New Registered Office Address:	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registeredy accept the appointment as registered agent. I	stered Agent: am familiar with and accept the obligations of the positi
	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 an 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 Cler Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first lette, 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 a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>V</u> <u>Mil</u>	n Doe se Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	C	ORIGENE I. ROSARIO	OWENSHIRE CIRCLE
Add			KISSIMME, FL 34744
X Remove			
2) Change	<u>VP</u>	MELISSA SANCHEZ	6990 VISTA PARK BLV
X Add			ORLANDO, FL 32829
Remove			
3) $\frac{X}{2}$ Change	PRES	HECTOR SANCHEZ	6990 VISTA PARK BLV
Add			ORLANDO, FL 32829
Remove			
4) X Change	SEC	GABRIEL BROWN	6990 VISTA PARK BLV
Add			ORLANDO. FI. 32824
Remove			
5) Change			
Add			
Remove			
6) Change		<del></del>	
Add			
Remove			

If amending or adding additional Art attach additional sheets, if necessary).	(Be specific)				
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	09/16/2019
The date of each amendment	· · · · · · · · · · · · · · · · · · ·
date this document was signed.	
Effective date <u>if applicable</u> :	9/10/2019
	(no more than 90 days after amendment file date)
	is block does not meet the applicable statutory filing requirements, this date will not like Department of State's records.
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 c	members entitled to vote on the amendment(s). The amendment(s) was/were frectors.
09/16. Dated	72019
Signature	
have n	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	HECTOR SANCHEZ
	(Typed or printed name of person signing)
PR	ES
	(Title of person signing)