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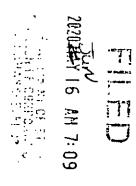
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JUL 25 2020 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	Infinite Horizons L	earning Center				
	83-4656618					
DOCUMENT NUMBER:						_
The enclosed Articles of An	nendment and fee are sub	mitted for filing.				
Please return all correspond	ence concerning this matt	er to the following:				
Lydia Orfila						
		(Name of Contact	Persor	1)		
Infinite Horizons Learning	g Center					
		(Firm/ Compa	ny)			
10531 SW 127th Court						
		(Address)				_
Miami Florida 33185						
		(City/ State and Zip	n Code	:)		
mariellydia@yahoo.com						
F	E-mail address: (to be use	d for future annual r	eport i	otification	1)	_
For further information con-	cerning this matter, please	e call:				
Catalina De Los Rios		į	786 at	3	208-7381	
	(Name of Contact Persor			ea Code)	(Daytime Telephone Number)	
Enclosed is a check for the	following amount made p	ayable to the Florida	а Depa	rtment of	State:	
XI \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy is sed)	
Mailing A	Address	<u>s</u>	treet .	Address		

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the	<u>e Florida De</u>	ept. of State)		
Infinite Horizons Learning Center				
(Docum	nent Number	of Corporation (if I	known)	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes	, this <i>Florida Not F</i>	for Profit Corporation adopts the fo	ollowing
A. If amending name, enter the new name of the	e corporatio	<u>on:</u>		
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		on" or "incorporate		The new "Inc."
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A				
C. Enter new mailing address, if applicable:		1 1 1 1 1 1 1 1		2620-1847
(Mailing address <u>MAY BE A POST OFFICE</u>	<u>BOX</u>) -			6 AM 7: 09
D. If amending the registered agent and/or registered agent and/or the new register			, enter the name of the	_
Name of New Registered Agent:	Catalina D	e Los Rios		
	11511 SW	90 ST		
New Registered Office Address:		(I	lorida street address)	
	Miami		33176 , Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	i. I am fam	iliar with and accep	t the obligations of the position.	

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 D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change Add Remove	Р	Francisco Orfila	10531 SW 127th Court Miami FL 33186
2) Change Add	Р	Gonzalo Yoel Viton Lopez	8770 SW 12th ST APT 202 Miami FL 33174
Remove Change Add Remove	<u>D</u>	Maria Perez	10531 SW 127th Court Miami FL 33186
4) Change Add	D	Gonzalo Yoel Viton Lopez	8770 SW 12th St Apt 202 Miami Fl 33174
5) X Change Add	<u>s</u>	Juliana Orfila	7821 SW 129th Ave Miami FL 33183 UN
Remove 6) Change X Add	<u>s</u>	Catalina De Los Rios	11511 SW 90th St Miami FL 33176
E. If amending or add (attach additional she		ticles, enter change(s) here: (Be specific)	
	· · · · · · · · · · · · · · · · · · ·		

		
		
		
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The date of each amendment(c) adoption:		if other than the
date this document was signed.		. It other than the
Effective date if applicable:	nore than 90 days after amendment file date)	
(no m	ore than 90 days after amenament fite date)	
<u>Note:</u> If the date inserted in this block does not document's effective date on the Department of	meet the applicable statutory filing requirements, this date will not b State's records.	e listed as the
Adoption of Amendment(s) (CH	ECK ONE)	
The amendment(s) was/were adopted by the was/were sufficient for approval.	ne members and the number of votes east for the amendment(s)	

. .

15 4.	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 06/11/2020				
	signature Catalina Delos Rios				
	(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)				
	(atalina Delos Rio)				
	(Typed or printed name of person signing)				
	Agent S				
	(Title of person signing)				