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COVER LETTER

TO: Amendment Section
Division of Corporations

The Student Success Project NAME OF CORPORATION: N20000001861 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ritchie Lucas (Name of Contact Person) The Student Success Project (Firm/ Company) 3774 Barbados Avenue (Address) Cooper City, FL 33026 (City/ State and Zip Code) ritchie@thinkfactory.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Ritchie Lucas 305 788-4105 (Daytime Telephone Number) (Area Code) (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy

enclosed)

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

Enclosed)

(Additional Copy is

Articles of Amendment to Articles of Incorporation of

The Student Success Project

(Name of Corporation as currently filed with the Florid	da Dept. of State)	
N20000001861		
(Document Nu	ımber of Corporation (if l	known)
Pursuant to the provisions of section 617,1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not F</i>	for Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:	
		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporate	ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>(33</u>)	20 20
		2
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		i i i i i i i i i i i i i i i i i i i
(Malling address MAT BE A POST OFFICE BOX)		<u> </u>
		_
D. If amending the registered agent and/or registered	office address in Florida	a, enter the name of the
new registered agent and/or the new registered offic		
Name of New Registered Agent:		
	(I	lorīda street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	red Agent: n familiar with and accep	t the obligations of the position.
	Signature of New Regis	tered 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 = Chie,
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, Pass a Change,

a change, Mike Jones i Mike Jones, V as Remo			T G T
Example: X Change X Remove X Add	V Mik	n Doe te Jones y Smith	Address Address
Type of Action (Check One)	<u>Title</u>	Name	Address 5
Change Add	ВМ	Chris Fisk	245 NE 14th St. Apt. 3010 Miami, Fl. 33132
Remove 2) Change Add	ВМ	Lori Moldovan	7744 SW 99 St. Miami, FL 33156
X Remove 3) Change Add X Remove	ВМ	Brett Warner	8950 SW 69 Ct. Miami. FL 33156
4) X Change Add	ВМ	Kamala Fletcher	680 NW 20th St. Homestead, FL 33030
Remove 5) Change	ВМ	Bonnie Crabtree	4233 Royal Palm Avenue Miami Beach, Fl. 33140
Remove Change X Add	ВМ	Pat Morris	410 Perugia Avenue Coral Gables, FL 33146
E. If amending or ad (attach additional st		Articles, enter change(s) here: y). (Be specific)	
PLEASE ADD ARTICLE The organization is organize		aritable, religious, educational.	
		he Internal Revenue Code, or corresponding	
section of any future federa	al tax code.		

PLEASE ADD ARTICLE X TO REAL	D:			
Upon the dissolution of this organization	on, assets shall be distributed for one or more exempt purposes			_
within the meaning of section 501(c)(3) of the In	nternal Revenue Code, or corresponding section of any future federal tax code,			-
or shall be distributed to the federal govern	ment, or to a state or local government, for a public purpose.			- -
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				_
The date of each amendment(s) adopt date this document was signed.	ion:		_, if othe	r than the
Effective date if applicable:	(no more than 90 days after amendment file date)			
	does not meet the applicable statutory filing requirements, this date	will not b	vi lietad	as the
document's effective date on the Depart		. WIII HOE C	e nsteu	as me
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 amendmen	nt(s)		

adopted by the board	rs or members entitled to vote on the amendment(s). The amendment(s) was/were d of directors.
i	August 11, 2021
Dated _	
Signature _	
	y the chairman or vice chairman of the board, president or other officer-if directors ave not been selected, by an incorporator – if in the hands of a receiver, trustee, or
	ther court appointed fiduciary by that fiduciary)
	ther court appointed fiduciary by that fiduciary)
	ther court appointed fiduciary by that fiduciary) Ritchie Lucas

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FILED