N2000006063

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TO: Amendment Section Division of Corporations

HARROW EDUCATION NAME OF CORPORATION:	N FOUNDATION	INC.	
N2000006063			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted	ed for filing.		
Please return all correspondence concerning this matter to	the following:		
Jessica Schalk Sturgeon			
(Na	ame of Contact Per	son)	
Harrow Education Foundation, Inc.			
	(Firm/ Company)	1	
105 US Highway 301 S., Suite 110			
, , , , , , , , , , , , , , , , , , ,	(Address)		
Tampa, Florida 33619			
(Cit	ty/ State and Zip C	ode)	
aharrow001@gmail.com			
E-mail address: (to be used for	r future annual repo	ort notification)
For further information concerning this matter, please call	l:		
Andrew Harrow	at	813	621-0045
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made payab	ole to the Florida D	epartment of S	State:
()	\$43.75 Filing Fee & Certified Copy Additional copy is enclosed)	Certific Certific	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

Street Address
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

Harrow Education Foundation, Inc.			
(Name of Corporation as currently filed with the Flor	ida Dept, of State)		
N20000006063			
(Document N	umber of Corporation (if k	nown)	•
Pursuant to the provisions of section 617,1006, Florida Stamendment(s) to its Articles of Incorporation:	tatutes, this Florida Not Fo	or Profit Corporation adopts the	following
A. If amending name, enter the new name of the corp	oration:		
<u> </u>			_The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorporated	I" or the abbreviation "Corp." (or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)		
	··	·	
			20
C. Pater was and Bury Address Manual Security		•••	20 :
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			ر بر د بر
			1
			- E:
			<u>.</u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		enter the name of the	5,2
Name of New Registered Agent:		.	
		lorida street address)	 -
New Registered Office Address:			
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. Ta		the obligations of the position.	
	Signature of New Regist	ered 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	PT John V Mike SV Sally		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>D</u> .	Michael Jenkins	105 US Highway 301 S., Suite 110 Tampa, Florida 33619
Remove			
2) Change Add	. <u>D</u>	Alvaro Cardona	105 US Highway 301 S., Suite 110 Tampa, Florida 33619
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add	•		
Remove			
E. If amending or additional sl		rticles, enter change(s) here: . (Be specific)	
<u> </u>			

•		
		 .
•	• •	
		
		
	<u> </u>	
-		_
The date of each amendment(s) adoption: _date this document was signed.		, if other than the
_		
Effective date <u>if applicable</u> :	more than 90 days after amendment file date)	
Note: If the date inserted in this block does n document's effective date on the Department	of meet the applicable statutory filing requirements, this date will not b of State's records.	e listed as the
Adoption of Amendment(s) (Q	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes east for the amendment(s)	

•

adopte	d by the board of directors.
	Dated 8-13-20
	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 tiduciary by that fiduciary)
	Jessica Schalk Sturgeon
	(Typed or printed name of person signing)
	Director
	(Title of person signing)

■ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were