N2000007616

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATI	B REAL EDUCATION CORP ON:
DOCUMENT NUMBER:	N20000007616
	mendment and fee are submitted for filing.
Please return all correspond	lence concerning this matter to the following:
	GUSTAVO BARRERO
	(Name of Contact Person)
	B REAL EDUCATION CORP
	(Firm/ Company)
	1900 CNTRAL FLORIDA BLAD POY KWCW
	(Address)
	ORLANDO, FLORIDA 32837
	(City/ State and Zip Code)
	gustavobarrerosanchez@gmail.com
	E-mail address: (to be used for future annual report notification)
For further information cor	cerning this matter, please call:
Gustavo Barrero	(Name of Contact Person) (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the	following amount made payable to the Florida Department of State:
□ \$35 Filing Fee	S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is 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

Articles of Amendment to Articles of Incorporation of

B REAL EDUCATION CORP.

(Name of Corporation as currently filed with the Flo	orida Dept. of State)		
	N20000007616		
(Document	Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not	For Profit Corporation adopts	the following
A. If amending name, enter the new name of the con	rporation:		
			The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorport	ated" or the abbreviation "Corp	o." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD.			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	x)		
			
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		da, enter the name of the	
			
Name of New Registered Agent:			
New Registered Office Address:		(Florida street address)	SECT TA
<u> </u>		, Florida	FF 69
	(City)	(Zip Code)	2:
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I		ept the obligations of the position	123 hus 20 1/12: 30
			1.75
	Signature of New Re	gistered 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	<u>PT</u> <u>V</u> <u>SV</u>	John Doc Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Namc</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add		-	
Remove 3) Remove Change Add Remove			
4) Change Add	-		
Remove 5) Change Add			T. 11. 20. CO
Remove 6) Change Add			
E. If amending or additional sheet	ets, if nece	onal Articles, enter change(s) here: essary). (Be specific)	

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	Aug 25 Constitution
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The data of each amendment(s) edention: FEBRUARY 16,2021	(1)
The date of each amendment(s) adoption:date this document was signed.	, if other than the
CCDDIIADV 14 2021	
Effective date if applicable: (no more than 90 days after amendment file date)
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	ements, this date will not be listed as the

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

	o members or members entitled to vote on the amendment(s). The amendment(s) was/were the board of directors.
Da	AUGUST 14, 2023
Sig	(By the charman of the board, president or other officer-if directors have not been specied, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	GUSTAVO BARRERO
	(Typed or printed name of person signing)
	DIRECTOR
	(Title of person signing)