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COVER LETTER

TO: Amendment Section : Division of Corporations

NAME OF CORPORATION:	CHRISTIAN SCHOOL, INC.
N21000002376 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are	
Please return all correspondence concerning this	matter to the following:
PETER A O'DRISCOLL	
	(Name of Contact Person)
	(Firm/ Company)
115 FOREST CIRCLE	
	(Address)
ORLANDO FL 32803	
•	(City/ State and Zip Code)
DONNAWARD50@YAHOO.COM	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, p	lease call:
PETER O'DRISCOLL	407 760-4402
(Name of Contact Pe	erson) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount ma	de payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Sta	
Moiling Address	Street Address

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

O'DRISCOEL CHRISTIAN SCHOOL, INC.			
Name of Corporation as currently filed with the Flori	da Dept. of State)		
N21000002376			
(Document No	umber of Corporation (if know	vn)	
Pursuant to the provisions of section 617,1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this Florida Not For F	Profit Corporation adopts the follo	owing
A. If amending name, enter the new name of the corpo	oration:		
N/A		Tho	new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incorporated" o		
B. Enter new principal office address, if applicable:	N/A		
(Principal office address MUST BE A STREET ADDRE	ESS)		
			
		<u>. </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		ZUZZ F E
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 If amending the registered agent and/or registered new registered agent and/or the new registered offi 		ter the name of the	
N!/A	ice madress.		12
Name of New Registered Agent:		,	
	 .		<u>.</u>
New Registered Office Address:	(Florid	la street address)	
		, Florida	<u>-</u>
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I ar		e obligations of the position	
		8	
-	Signature of New Registere	d 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 Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3 1 Remove Add Remove			
4) Change Add	·		
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. <u>If amending or addin</u> (attach additional shee		onal Articles, enter change(s) here: essary). (Be specific)	
ARTICLE III: THE SPE	CIFIC PL	JRPOSE FOR WHICH THIS CORPORATION IS OF	RGANIZED IS:
SCHOOL FOR UNDERS	SERVED	CHILDREN IN THE CENTRAL FLORIDA AREA	
SAID ORGANIZATION	IS ORG	ANIZED EXCLUSIVELY FOR CHARITABLE, RE	LIGIOUS, EDUCATIONAL AND
SCIENTIFIC PURPOSE	S, INCLU	JDING, FOR SUCH PURPOSES, THE MAKING OF	DISTRIBUTIONS TO
ORGANIZATIONS THA	AT QUAI	IFY AS EXEMPT ORGANIZATIONS DESCRIBE	O UNDER SECTION 501(c)(3)

OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAI	X
CODE.	···
UPON DISSOLUTION OF THE ORGANIZATION, ASSETS SHALL BE DISTRIBUTED FOR ONE OR MORE	
EXEMPT PURPOSES WITHIN THE MEANING OF SECTION 501(c)(3) OF THE INTERNAL REVENUE COL	DE, OR
CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE, OR SHALL BE DISTRIBUTED TO	THE
FEDERAL GOVERNMENT, OR TO A STATE OR LOCAL GOVERNMENT, FOR A PUBLIC PURPOSE.	
	
<u></u>	
	
The date of each amendment(s) adoption:	_, if other than the
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file date)	
$\underline{\underline{Note:}}$ If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	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.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.			
Signature 2-70-72			
(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)			
PETER O'DRISCOLL			
(Typed or printed name of person signing)			
PRESIDENT			

(Title of person signing)