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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Battlefront Educa	ation and Wellness,	Inc.		
DOCUMENT NUMBER: N21000005966				
The enclosed Articles of Amendment and fee are s				
Please return all correspondence concerning this m	atter to the following	ig:		
Lisa Hill Boatwright				
	(Name of Conta	ct Person)		
Battlefront Education and Welfness, Inc.				
	(Firm/ Com	pany)		
1000 S. Jefferson Street, Suite F				
	(Address	s)		
Perry, FL 32348				
	(City/ State and 2	Zip Code)		
Ihill@battlefrontine.com				
E-mail address: (to be use	ed for future annual	report notif	icatio	n)
For further information concerning this matter, pleas				
Lisa Hitl Boatwright		850 at		8436483
(Name of Contact Perso	n)		ode)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Floric	ia Departme	nt of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status		ce& ∐S (yis (852.50 Pertifi Pertifi	Filing Fee cate of Status ed Copy ional Copy is
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Amendment Section Amendment Section			(1.12)	

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

mendment 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

The state of the s Battlefront Education and Wellness, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N21000005966 (Document Number of Corporation (if known) Pursuant to the provisions of section 617,1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/Λ name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. 1000 S. Jefferson Street, Suite F B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Peny, FL 32348 C. Enter new mailing address, if applicable: 1000 S. Jefferson Street, Suite F. (Mailing address <u>MAY BE A POST OFFICE BOX</u>) Perry, FL 32348 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: N/A , Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered 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 Type of Action (Check One)	PT John E V Mike J SV Sally S	ones	<u>Addreş</u> s
1) Change Add	<u>s</u>	Dorothy J. Patterson	
* Remove 2) Change Add	<u>T</u>	Howard D. Woods	
x Remove 3) Change Add Remove			
4) Change Add			
Remove 5) Change Add Remove			
6) Change Add			
E. If amending or addin (attach additional shee	g additional Arti ts, if necessary).	cles, enter change(s) here: (Be specific)	

	(no .	more than 90 de	ays after amendm	ent file date)		· · · · · · · · · · · · · · · · · · ·
Effective date if applicable:	9/29/2021					
The date of each amendmen date this document was signed	t(s) adoption: _ l.				.	, if other than the
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<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

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 $\frac{9/29/3021}{20000000000000000000000000000000000$
(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)
Lisa Marie Hill
(Typed or printed name of person signing)
President, Director
(Title of person signing)