N2100000 7768

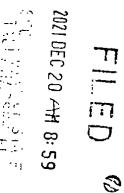
(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Name)	
`	, ,	
(Doc	cument Number)	
(55)		
Certified Copies	Cortificator of	Status
Certified Copies	_ Certificates of	Status
		
Special Instructions to F	Filing Officer:	

Office Use Only



600374926466

10/15/21--01014--024 **40.00



C. BRUMBL.

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Christine's Angel Academy N21000007748 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: UMEHO, F1. 34221 Knjenkins 84@gmail com E-mail address: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) Mailing Address Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation of

Christine's And	gel Academy Inc
(Name of Corporation as currently filed with the Florida	Dept. of State)
N210000	777 <i>68</i>
(Document Num)	ber of Corporation (if known)
Pursuant to the provisions of section 617,1006. Florida Staturamendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	tion:
_ Christine's Angels	Academy Inc. The new
name must be distinguishable and contain the word "corpora" (Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	_802 1st are dr last
(Principal office address <u>MUST BE A STREET ADDRESS</u>	
	Palmetto, F1. 34221
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	802 1st are dr east
	apt. 201
	Palmetto, FI 34221
D. If amending the registered agent and/or registered off	ice address in Florida, enter the name of the
new registered agent and/or the new registered office	
Name of New Registered Agent:	
	# FI
New Registered Office Address:	(Florida street address)
	
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	
I hereby accept the appointment as registered agent. I am fa	miliar with and accept the obligations of the position.
S	ignature 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	<u>V</u> <u>Mik</u>	<u>n Doe</u> e Jones y Şmith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add		Tizzany Buyd	7536 S Seeley Chicago, IL 60620
Remove 2) Change Add	T	Emily Webster	6200 Bakers Ferry R SW apt 103 Atlanta, GA 3033
Remove 3) Change Add Remove			4+1WHZ, C/4 : 3053
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add Remove			
	ling additional A weets, if necessary	xrticles, enter change(s) here:). (Be specific)	

The date of each amendment(s) adoption:late this document was signed.	12/15/2	, if other than the
		
		 <u> </u>
	·	
		
		
-	<u> </u>	

document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)



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

 ϕ

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 _	12/15/21	
Signature _	4 hills	
1	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)	
	Keesha Jenkins	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	