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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:Scientiae			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are st	abmitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
N/A			
	(Name of Contact Perso	on)	•
N/A			
	(Firm/ Company)		,
N/A			
	(Address)		
N/A			
	(City/ State and Zip Co	de)	
N/A			
E-mail address: (to be us	sed for future annual repor	t notification)	
For further information concerning this matter, plea	ise call:		
Khary Henry	S:	50	815-7056
(Name of Contact Pers		Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida De	pariment of S	tate:
☐ \$35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status	_	Certific Certific	onal Copy is
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amer Divis The C	t Address adment Section ion of Corpor Centre of Ta N. Monroe	ations

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



2023 MAR 16 PH 1: 43 Scientiae (Name of Corporation as currently filed with the Florida Dept. of State) N21000013104 (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/A name must he distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) 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 (City) (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	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add	<u>P</u>	Morgan Puente	113 South Monroe Street Tallahassee, FL 32301
x Remove			
2) Change Add	<u>V.P.</u>	Quentin Knight-Baker	914 Railroad Avenue Tallahassee, FL 32310
Remove 3) × Change Add Remove	<u>P</u>	Kharv Henry	914 Railroad Avenue Tallahassee, FL 32310
4) X Change Add	V.P	Cherrelle Lawson	914 Railroad Avenue Tallahassee, FL 32310
Remove 5)	<u>V.P.</u>	Kasimu Henry	914 Railroad Avenue Tallahassee, FL 32310
6) Change Add			
Remove			
E. If amending or addir (attach additional shee		cles, enter change(s) here: (Be specific)	
	_		

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03/03/2023	
The date of each amendment(s) adoption: 03/03/2023 date this document was signed.	if other than the
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no document's effective date on the Department of State's records.	t 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.

Dated 3/03/2023
Signature (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)
Khary Henry
(Typed or printed name of person signing)

(Title of person signing)