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TO: Amendment Section Division of Corporations

Palm Tree	Academy Inc.		
N2200000056	7		
DOCUMENT NUMBER:			<u>.</u>
The enclosed Articles of Amendment and f	ee are submitted for filing.		
Please return all correspondence concerning	g this matter to the following	<u>;</u> ;	
Lathricia Frazier			
	(Name of Contac	t Person)	
Palm Tree Academy Inc.			
	(Firm/ Comp	oany)	
515 Bellissimo PL			
	(Address)	
Howey in the Hills, FL 34737			
	(City/ State and 2	Lip Code)	-
Ptaroots@gmail.com			
E-mail address:	(to be used for future annual	report notification	n)
For further information concerning this mat	ter, please call:		
Lathricia Frazier		at	352-460-1803
(Name of Cont	act Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amou	nt made payable to the Flori	da Department of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Certificate		Certif py is Certif (Addi	0 Filing Fee ficate of Status fied Copy fitional Copy is fied)
Mailing Address		Street Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

FILED

PALM TREE ACADEMY INC.

2022 MAR -7 AM 10: 22

(Name of Corporation as currently filed with the Florid	la Dept. of State)	SECUTION OF THE STATE
NA		TALL/MINSSEE, FL
(Document Nu	mber of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	tutes, this Florida Not Fo	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:	
NA		The new
name must be distinguishable and contain the word "corpo" "Company" or "Co." may not be used in the name.	oration" or "incorporated	I" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRE</u> .	<u>ss</u>) _{NA}	
	-	
C. Enter new mailing address, if applicable:	NA NA	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
D. If amending the registered agent and/or registered of	effica address in Florida	enter the name of the
new registered agent and/or the new registered offic		enter the name of the
Name of New Registered Agent: NA		
	(F	orida street address)
New Registered Office Address:		
·		, Florida (Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register	ed Agent:	
I hereby accept the appointment as registered agent. I am	familiar with and accept	the obligations of the position.
	Signature of New Regist	ered 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 So	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) × Change Add Remove	<u>P</u>	Lathricia Frazier	515 Bellissimo PL Howey in the Hills, Fl 34737
2) × Change Add	<u>S</u>	Willie Frazier	515 Bellissimo PL Howey in the Hills, FL 34737
Remove 3) Remove Add Remove		<u>NA</u>	
4) Change Add		NA	
Remove 5) Change Add Remove		<u>N</u> A	
6) Change Add		<u>NA</u>	
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
<u>NA</u>	1		<u></u>

NA		
	-	
. <u>.</u>		
		_
The date of each amendment	t(s) adoption:	if other than the
date this document was signed	.(s) adoption:	, it office than the
Effective date if applicable:	NA	
Entetive date <u>ii applicable</u> .	(no more than 90 days after amendment file date)	
	nis block does not meet the applicable statutory filing requirements, this he Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/w was/were sufficient for ap	vere adopted by the members and the number of votes cast for the amendoproval.	dment(s)

Dated	2/26/2022
Signatu	(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)
	Lathricia R. Frazier
	(Typed or printed name of person signing)