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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Out Reach for Student with Chape Abelilie	Ю-
DOCUMENT NUMBER: N2200009469	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
(Name of Contact Person)	
(Firm/ Company)	
930 SE Central Parkway (Address)	
Stuart, FL 34994 (City/ State and Zip Code)	
MS Indsay literacy Egmoil. Com E-mail address: (to be used for future annual report notification)	7 .0
For further information concerning this matter, please call:	-
Lindsay Lopez at (772) 510 - 2048 (Area Code) (Daytime Telephone Number)	-
Enclosed is a check for the following amount made payable to the Florida Department of State:	Œ,
☐ \$35 Filing Fee	

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

Outreach for Student	s WITH	<u>Unique</u>	Abilities	\bot Dc
(Name of Corporation as currently filed with the Flor		V		
	0009460	<u> </u>		
(Document N	umber of Corporatio	n (if known)		
Pursuant to the provisions of section 617,1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this <i>Florida</i> :	Not For Profit Co	orporation adopts the	following
A. If amending name, enter the new name of the corp	oration:			
N/A				The new
name must be distinguishable and contain the word "corp" "Company" or "Co." may not be used in the name.	poration" or "incorp	oorated" or the a	bbreviation "Corp." c	or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u> </u>	N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		
(maning address MAT DE AT OST OFFICE BOS)				
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		lorida, enter the	name of the	• •
Name of New Registered Agent:		<u> </u>	<u>.</u>	·
New Registered Office Address:		(Florida street a	(ddress)	· ·
			, Florida	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Registor I hereby accept the appointment as registered agent. I as		accept the obliga	tions of the position.	
	Signature of New	Registered Agent	t, 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	<u>ones</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add	$\overline{\mathcal{D}}$	Moose Brown	930 SE Central Puy Studet, FL 34994
2) Change Add	<u>S</u>	Lindsay Melda	930 SE Central Puy Stract, Fl 34994
Remove Change Add	<u>S</u> _	Julie Vaughan	930 SE Central Pur Stures, FI 349945
Remove 4) Change Add	<u>T</u>	Kathleen Managlan	930 SE Central Puy
Remove 5) Change			Start, Fl 34994
Add			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
			

		
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		, .
The date of each amendment(s) adoption: date this document was signed.	· · · · · · · · · · · · · · · · · · ·	, if other than the
Effective date if applicable:		
()	no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Departmen	not meet the applicable statutory filing requirements, this date will not tof State's records.	be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted b was/were sufficient for approval.	by the members and the number of votes cast for the 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 12/12/2023

(By the chairman of 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)

(Typed or printed name of person signing)

(Title of person signing)