

N220000:13194

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

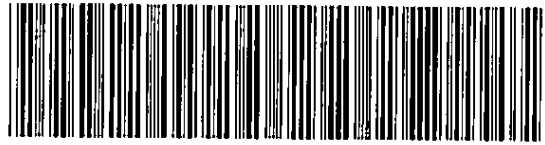
(Document Number)

Certified Copies _____

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Office Use Only



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2022 DEC 27 PM 3:18

10/21/10 7:10:10 PM

2022 DEC 21 AM 11:34

*00789, 01169, 20707, 00671



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 22, 2022

CORPORATE ACCESS, INC.

TALLAHASSEE, FL 32303

SUBJECT: EMERGING TECHNOLOGY APPRENTICESHIPS INC.
Ref. Number: N22000013194

2022 DEC 27 PM 3:19

We have received your document for EMERGING TECHNOLOGY APPRENTICESHIPS INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6823.

Annette Ramsey
OPS

Letter Number: 022A00028682

2022 DEC 27 AM 11:21

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: MISTY 12/16

CERTIFIED COPY

XX PHOTOCOPY

CUS

XX FILING

INC AMEND

2022 DEC 27 PM 3:19
310

1. EMERGING TECHNOLOGY APPRENTICESHIPS INC.

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Emerging Technology Apprenticeships Inc.

DOCUMENT NUMBER: N22000013194

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Melissa Boutwell

(Name of Contact Person)

Emerging Technology Apprenticeships Inc.

(Firm/ Company)

1511 East State Rd. 434, Suite 2001

(Address)

Winter Springs, Florida 32708

(City/ State and Zip Code)

board@eta.careers

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melissa Boutwell

(Name of Contact Person)

at (407) 773-3753

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|---|--|---|--|

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

Emerging Technology Apprenticeships Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N22000013194

(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

The new 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.

B. Enter new principal office address, if applicable:

N/A

(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

PO BOX 4367

Saint Augustine, FL 32085

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: N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

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.

N/A

Signature of New Registered Agent, if changing

2022 DEC 27 PM 3:19

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Mary Elizabeth Price</u>	<u>2114 Laurelwood Way</u> <u>Aloma, FL 32792</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Rick J. LeBlanc</u>	<u>PO BOX 4367</u> <u>Saint Augustine, FL 32085</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u>

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

N/A

2022 DEC 27 PM 3:19

11:11:30

N/A

2022 DEC 27 PM 3:19

The date of each amendment(s) adoption: N/A, if other than the date this document was signed.

Effective date if applicable: N/A
(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 not be listed as the 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 cast for the amendment(s) was/were sufficient for approval.

- ☒ 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 12/23/2022

DocuSigned by:
Signature Melissa Boutwell

(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)

Melissa Boutwell
(Typed or printed name of person signing)

Director
(Title of person signing)

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Certificate Of Completion

Envelope Id: 10F15D72AFF64A87A814B759C52D3067

Status: Completed

Subject: Complete with DocuSign: 12-23-22 ETA Articles of Amendment for non profit and Sec of State ltr.pdf

Source Envelope:

Document Pages: 7

Signatures: 1

Envelope Originator:

Certificate Pages: 1

Initials: 0

Brenda Andjelic

AutoNav: Enabled

PO BOX 4367

EnvelopeId Stamping: Enabled

Saint Augustine, FL 32085

Time Zone: (UTC-08:00) Pacific Time (US & Canada)

administration@asp-int.com

IP Address: 87.116.165.135

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Record Tracking

Status: Original

Holder: Brenda Andjelic

Location: DocuSign

12/23/2022 6:18:09 AM

administration@asp-int.com

Signer Events

Signature

Timestamp

Melissa Boutwell

boardservice@eta.careers

Security Level: Email, Account Authentication
(None)

DocuSigned by
Melissa Boutwell
EB012FC72B6342D

Sent: 12/23/2022 6:20:03 AM

Viewed: 12/23/2022 9:29:35 AM

Signed: 12/23/2022 9:29:56 AM

Signature Adoption: Pre-selected Style

Using IP Address: 69.180.89.60

Electronic Record and Signature Disclosure:

Not Offered via DocuSign

In Person Signer Events

Signature

Timestamp

Editor Delivery Events

Status

Timestamp

Agent Delivery Events

Status

Timestamp

Intermediary Delivery Events

Status

Timestamp

Certified Delivery Events

Status

Timestamp

Carbon Copy Events

Status

Timestamp

Witness Events

Signature

Timestamp

Notary Events

Signature

Timestamp

Envelope Summary Events

Status

Timestamps

Envelope Sent

Hashed/Encrypted

12/23/2022 6:20:03 AM

Certified Delivered

Security Checked

12/23/2022 9:29:35 AM

Signing Complete

Security Checked

12/23/2022 9:29:56 AM

Completed

Security Checked

12/23/2022 9:29:56 AM

Payment Events

Status

Timestamps