N23000004541

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TO: Amendment Section **Division of Corporations** Anchor Academic Center of Excellence, Inc. NAME OF CORPORATION: N23000004541 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Tonya McEver (Name of Contact Person) Anchor Academic Center fo Excellence, Inc. (Firm/ Company) 571 Haverty Court, Suite W (Address) Rockledge, Florida 32955 (City/ State and Zip Code) tmcever@anchoracademic.org E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Tonya McEver 458-2939 (Area Code) (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy

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

Enclosed)

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Articles of Amendment to Articles of Incorporation οf

Anchor Academic Center of Excellence, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N23000004541 (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 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. 571 Haverty Court, Suite W B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Rockledge, Florida 32955 C. Enter new mailing address, if applicable: 571 Haverty Court, Suite W (Muiling address MAY BE A POST OFFICE BOX) Rockledge, Florida 32955 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: , 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 D V Mike J SV Sally S	<u>ones</u>		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change Add	<u>D</u>	David Ryan	571 Haverty Court, Suite W Rockledge, Fl. 32955	
Remove				•
2) Change Add				;
Remove 3) Change Add Remove				l
4) Change Add				
Remove				o 😂
5) Change Add				ECC. P. S. C.
Remove				DH 20 LLASKA
6) Change Add				PN 1: 12
Remove				
E. If amending or additional shed	ng additional Art	icles, enter change(s) here: (Be specific)		12
•	, , , , , , , , , , , , , , , , , , ,			
N/A				
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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	6-3-2023
Dated	The MOO
C:amata	(Cours I)
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 tiduciary by that tiduciary)
	Tonya McEver
	(Typed or printed name of person signing)

(Title of person signing)

SECRETATION OF STATE