

N93000004154

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

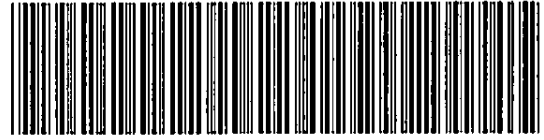
(Business Entity Name)

(Document Number)

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03/09/23--01018--016 \*\*35.00

1-1-23  
2023 MAR -9 AM 7:48  
STATE  
FILE

of 5/23/2023



Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

2023 MAR -9 AM 7:48

REVELATION ACADEMY OF EXCELLENCE INC

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

N93000004154

STATE  
TALL. SSEC. FL

(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:**

\_\_\_\_\_ *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:** \_\_\_\_\_  
*(Principal office address MUST BE A STREET ADDRESS)*

**C. Enter new mailing address, if applicable:** \_\_\_\_\_  
*(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:* \_\_\_\_\_

*New Registered Office Address:*

\_\_\_\_\_  
*(Florida street address)*

\_\_\_\_\_  
*(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.*

\_\_\_\_\_  
*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:

<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 type="checkbox"/> Remove	<del>Trustee</del>	<u>BJ Moore</u>	<u>1070 Montgomery Road #275</u> <u>Altamonte Springs, FL 32714</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Director</u>	<u>Marsha Alvarez</u>	<u>1070 Montgomery Road #275</u> <u>Altamonte Springs, FL 32714</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Director</u>	<u>Marv Williams</u>	<u>1070 Montgomery Road #275</u> <u>Altamonte Springs, FL 32714</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Director</u>	<u>Melissa Simona Arana</u>	<u>1070 Montgomery Road #275</u> <u>Altamonte Springs, FL 32714</u> <u>1070 Montgomery Road #275</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Director</u>	<u>Andrew Nunez</u>	<u>1070 Montgomery Road #275</u> <u>Altamonte Springs, FL 32714</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____

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

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

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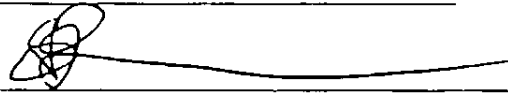


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- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 02/21/2023 \_\_\_\_\_

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)

Dr. Shermaine Nicholas

\_\_\_\_\_  
(Typed or printed name of person signing)

Chairperson

\_\_\_\_\_  
(Title of person signing)