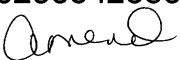
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3/24/14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: NEW DIRECTION INSTITUTE, INC.			
DOCUMENT NUMBER: N9600002115			
The enclosed Articles of Amendment and fee are submitted for	filing.		
Please return all correspondence concerning this matter to the fo	llowing:		
DR. GRACE BROOKS			
(Name of	Contact Person)		
NEW DIRECTION INSTITUT	E, INC.		
(Firm	v/ Company)		
6730 WEST COMMERCIAL BLVD.			
(,	Address)		
LAUDERHILL, FLORIDA 333	319		
(City/ Sta	te and Zip Code)		
missgraceb@aol.com		**	
E-mail address: (to be used for future	annual report noti	fication)	
For further information concerning this matter, please call:			
DR GRACE BROOKS	954)	7488444	
(Name of Contact Person)	(Area Code	& Daytime Telephone Number)	
Enclosed is a check for the following amount made payable to the	ie Florida Departm	ent of State:	
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Certificate of Status Certificate of Status (Addition enclose)	d Copy onal copy is	3\$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	Clifton Bu 2661 Exec	nt Section f Corporations	

Articles of Amendment

Articles of Incorporation

FILED

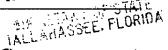
NEW DIRECTION INSTITUTE, INCORPORATED

2014 MAR 21 PM 3: 00

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

N96000002115

(Document Number of Corporation (if known)



Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporati		s, this <i>Florida Not For Profit Corp</i> e	oration adopts the following
A. If amending name, enter the new name	me of the corporati	on:	
name must be distinguishable and contain "Company" or "Co." may not be used in		ion" or "incorporated" or the abbr	The new reviation "Corp." or "Inc."
B. Enter new principal office address, i		6730 WEST COMMERCIA	AL BLVD.
(Principal office address <u>MUST BE A ST</u>		LAUDERHILL, FL	. 33319
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C		6730 WEST COMMERCIA	AL BLVD.
		LAUDERHILL, FLORIC	DA 33319
D. If amending the registered agent and new registered agent and/or the new			me of the
Name of New Registered Agent:	DR. GRACE	BROOKS	
	6730 WEST	COMMERCIAL BLVD	•
New Registered Office Address:	1	(Florida street address)	-
	LAUDER		33319
	(City)	,, 1701144	(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe.			as of the position
Thereby decept the appointment as register	May	Registered Agent, if changing	-
		Page 1 of A	

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.

X Change X Remove X Add	<u>V</u> <u>Mike</u>	n Doc e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	C/S	JENNIFER HYLTON	5257 NW 29TH CT
Add			MARGATE, FL 33063
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove		·	
4) Change			
Add			
Remove			<u> </u>
5) Change		···	
Add			
Remove			
6) Change			
Add		-	
Remove			

ttach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)

The date of each amendment(s) adoption: 6/30/13 date this document was signed. Effective date if applicable: 3/20/14 (no more than 90 days after amendment file date)	, if other than the
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 3/2013	
Signature Dr. Jorah & fr	
(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)	_
Gracelyn E BROOKS	
(Typed or printed name of person signing)	
(Title of person signing)	