12800005663

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COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: Franklin Academy Inc
DOCUMENT NUMBER: <u>N98000005663</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Margaret Franklin (Name of Contact Person)
(Name of Contact Person)
1101 Missicnwood Lane
· · ·
City/ State and Zip Code)
(City/ State and Zip Code)
Frankling endlengine @ 9 mail- com
For further information concerning this matter, please call:
MArgaret Eranklin at 850-322-2860 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee S43.75 Filing Fee S52.50 Filing Fee Certificate of Status (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status (Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

to Articles of Incorporation of

Articles of Amendment

(Name of Corporation as curr	ently filed with the	Florida Dept. of State)
N98000056	63	
. (Document Nu	mber of Corporation	(if known)
rsuant to the provisions of section 617.1006, Florida Statendment(s) to its Articles of Incorporation:	autes, this Florida No	t For Profit Corporation adopts the following
If amending name, enter the new name of the corpor	cation:	
_		The ne
me must be distinguishable and contain the word "corpo Company" or "Co," may not be used in the name.	oration" or "incorpo	rated" or the abbreviation "Corp." or "Inc.
ompany or Co. may not be used in the name.		
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDRES</u>	<u> </u>	
		*** ·
Enter new mailing address, if applicable:		. •
(Mailing address MAY BE A POST OFFICE BOX)		· · ·
		چ.
If amending the registered agent and/or registered of new registered agent and/or the new registered office		ida, enter the name of the
	<u> </u>	
Name of New Registered Agent:		
		(Florida sireei address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
w Registered Agent's Signature, if changing Register ereby accept the appointment as registered agent. I am	r <mark>ed Agent:</mark> a familiar with and ac	cept the obligations of the position.
	Signature of Nove I	legistered Agent, if changing
	g	and the contract of a constitution of

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	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	Chaplain	ZOE Bemett	1225 Central St TOULAHASSEE FL
Add Remove			<u>3230</u> 3
2) Change	Director	Anthony Dobbins	1209 Bernett St TAllAhasser FC
Remove			32304
3) Change			
Remove			
4) Change Add			
Remove 5) Change		<u>.</u>	
Add			
Remove 6) Change			
Add			
Remove			

f amending or adding additional & utach additional sheets, if necessary	v). (Be specifi	ic)					
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		.=	<u>.</u>				

The date of each amendment(s) ado late this document was signed.	ption:	, if other than the
Effective date <u>if applicable</u> :		744.
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block focument's effective date on the Department.	x does not meet the applicable statutory filing requirements, this date will nurtiment of State's records.	ot be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes east for the amendment(s)	٠
adopted by the board of director		
Dated $\frac{5-1}{}$	8-2018 gg-t Flake	
	· · · · · · · · · · · · · · · · · · ·	
have not beer	nan or vice chairman of the board, president or other officer-if directors a selected, by an incorporator – if in the hands of a receiver, trustee, or oppointed fiduciary by that fiduciary)	
/\/	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	2 E O	
	(Title of person signing)	