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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Hollywood	Education and	Witeracy Project Miami
DOCUMENT NUMBER: N98444	φ\$6485	·
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Morgan A. Perez		
3	(Name of Contact Person)
Hollywood Education	and Literacci (Firm/ Company)	g Project Miami Inc.
13828 SW 56 St	(Address)	
	(11001033)	
Miami Flarida 3:	3175	
	(City/ State and Zip Code))
Morsanchelow E-mail address: (to be used	Mawi organian reports	otification)
For further information concerning this matter, please	call:	
Morgan A. Pevez (Name of Contact Person)	at3	05 752 4003
(Name of Contact Person)) (Arc	a Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pa	iyable to the Florida Depar	tment of State:
☐ \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Division	address nent Section of Corporations ntre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	P3 * 1	D · CC· · ·			
(Name of Corporation as currently filed with the	-		1) - 1	λ .	
Hollywood Education of (Docum	ind	Litereci	x tro jes	Wliam	INC
(Docum	ent Numb	ber of Corporation	(if Inown)		
Pursuant to the provisions of section 617,1006, Flor	rida Statu	tes, this <i>Florida Na</i>	S ot For Profit Coro	poration adopts th	e following
amendment(s) to its Articles of Incorporation:			<i>-</i>		
A. If amending name, enter the new name of the		4:am. A A			
A. If amending name, enter the new name of the	: corpora	tion: 14 ct			
					The new
name must be distinguishable and contain the word "Company" or "Co," may not be used in the name		ation or incorpol	rated or the abbi	reviation Corp.	or Inc.
	-	JA			
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A					
(Principal office dadress MOST BE A STREET A	<i>ididkess</i>	2)			
					
C. Enter new mailing address, if applicable:		. 0			
(Mailing address <u>MAY BE A POST OFFICE I</u>	<u>BOX</u>)	NA			
					_
					-
D. If amending the registered agent and/or regis	tered off	ice address in Flor	<u>ida, enter the na</u>	me of the	
new registered agent and/or the new registere	ed office	address:			
Name of New Registered Agent:	NA.				
					
•			(Florida street addr	est)	
New Registered Office Address:	AG		(* 15/14/12/17/04/14 <u>—</u>	,	
	•			Cta-ida	
	 -	(City)		_, Florida (Zip Code)	
		• • •		1.1	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	egistered	l Agent:	oant the obligation	es of the position	
тиетелу иссерь те арронитет их гедмитей адет	. 1 am ja	umuur wun ana ac	cept me oonganor	is of the position.	
-	<u>pr</u>	ignature of New Re	paistered Ament if	chanoina	
	.,	S. am c ty from Me	Some our rigorii, ij		202
				•	2022 /.:

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 Jo SV Sally S	ones	
Type of Action (Check One)	Title	Name	Address
1) Change Add	_D_S	Tawara R Batalha	13828 5W 565t. -Miami Fl 3317-5
2) Change Add	DS	Morgan A. Perez	138 28 5W 565t -Migmi F 33175
Remove 3) Change Add Remove	- -		
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			
E. If amending or addin (attach additional shee.		cles, enter change(s) here: (Be specific)	

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		1k		
The date of each amendment(s) adoption date this document was signed	: August	8th, 2022		if other than the
Effective date if applicable:				
(no more than 90 days	after amendment file date)		
Note: If the date inserted in this block does document's effective date on the Departme	s not meet the applicat nt of State's records	ole statutory filing requiremen	nts, this date will not	be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

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 08 09 2022 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)
Tamara R. Batalha
(Typed or printed name of person signing)
DS
(Title of person signing)