P01000099200

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAII	L
(Business Entity Name)	
(Document Number)	—
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

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SEGMENT OF THE CALL A

JUN 0 9 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: The W	right Acade	my, Inc
DOCUMENT NUMBI	ation: <u>The W</u> er: <u>P010000</u>	19200	
	f Amendment and fee are su		
Please return all corresp	ondence concerning this ma	tter to the following:	
-	Dorothy	Name of Contact Person	1
_	<u> </u>	Firm/Company	
_	6061	St. Johns Address HKa, Florida City/ State and Zip Code	71e
	Λ.	Address	
_	Palo	etka, Florida	32/77
		City/ State and Zip Code	•
	Polkadot do E-mail address! (to be us	ed for future annual report	Net notification)
For further information	concerning this matter, pleas	se call:	
Dorathy Name of	Wright Contact Person	at (<u>386</u> Area Co	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
	ing Address		Address
	ion of Corporations		Iment Section on of Corporations
Division of Corporations P.O. Box 6327			Building
	hassee, FL 32314		Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



(Name of Corporation as currently filed with the	ny, Trc. 14 MIT 23 PM 2:09
(Name of Corporation as currently filed with t	the Florida Dept. of State)
P01000099200	Think he was the said of the
(Document Number of Corporati	on (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, s Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corporation	<u>n:</u>
Polka Dot Kids Learning C	ration," "company," or "incorporated" or the abbreviation
ame must be distinguishable and contain the word "corpor	ration," "company," or "incorporated" or the abbreviation
Corp.," "Inc.," or Co.," or the designation "Corp," "Inc,"	or "Co". A professional corporation name must contain the
ord "chartered," "professional a ssociation," or the abbreviat	ion "P.A."
Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
. If amending the registered agent and/or registered office	address in Florids, enter the name of the
new registered agent and/or the new registered office ade	
Name of New Registered Agent	
(Florid	da street address)
New Registered Office Address:	, Florida
New Registered Office Address.	(City) (Zip Code)
	· · · · · · · · · · · · · · · · · · ·
lew Registered Agent's Signature, if changing Registered A	gent:
hereby accept the appointment as registered agent. I am fami	
Signature of New Pagista	pred 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change		_	
Add Remove			
2) Change Add			
Remove			
3) Change	<u> </u>		
Add Remove			
4) Change			
Add			
Remove			
5) Change			
Remove			
6) Change			
Add			
Damoua			

ach additional sheets, if necessary).	(Be specific)		
			
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in amendment provides for an exc	nange, rectassificate	on, or cancellation	or issueu spares,
avisions for implementing the ame	MANUELLE IL SICH COSITE	med in the antendi	LILLIO JOSSAIL
ovisions for implementing the ame (if not applicable, indicate N/A)			
		 	
rovisjons for implementing the ame (if not applicable, indicate N/A)			

The date of each amendment(s) adoption date this document was signed.	on: May 19, 2014	_, if other	than the
Effective date if applicable:	m: May 19, 2014 May 20, 2014 (no more than 90 days after amendment file date)	_	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) nt for approval.		
The amendment(s) was/were approved must be separately provided for each	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):		
"The number of votes cast for th	e amendment(s) was/were sufficient for approval		
by	(voting group)		
action was not required.	by the board of directors without shareholder action and shareholder		
Dated 5/2/12 Signature 100 a directo	the Wife or other officer – if directors or officers have not been	_	
selected, by	an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)		
	Dorothy Wright (Typed or printed name of person signing) CEO/President (Title of person signing)	4 MAY 23 PH	Francisco
	(Title of person signing)	2:10	