P04 000055607

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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: SCHOOLS FOR SALE INS DOCUMENT NUMBER: PO400055607 The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
-	5 CHOOLS	Name of Contact Person LS FOL SING Firm/ Company Address COAST FI City/ State and Zip Code FOR SALE CO ed for future annual report	PL BZ137 AOLOCOM		
For further information concerning this matter, please call:					
Down	is more	at (407	865-4385		
Name of Contact Person at (407) 865-4385 Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	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 Tallahassee, FL 32314		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2021 MAR 18 PM 1:51

(Name of Corporation as current	ly filed with the Florida Dept. of State)
SCHOOLS FOR SINC .	TP04000055607
	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
D. D. dan and a standard of the standard of the standard of	14 MONTHUA PL
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	PALM COAST, FL 32137
	·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	14 MONTILLA PL PALM GOAST, FL 32137
	PALM COAST, FL 32137
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres Name of New Registered Agent	
(Florida st	reet address)
V 5	Mari a
New Registered Office Address:	(Cirv) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position.
Signature of Van	Registered Agent, if changing
Signature of ivew t	negisierea Agent, ij changing
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)) (e), F.S.

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 Do	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove 3) Change		 .		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_ .		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)
for amondment provides for an evel	hange reclassification or cancellation of issued shares
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
2.00	
(if not applicable, indicate N/A)	

: :

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment	file date)
Note: .If-the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing rec partment of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors witho	ut shareholder action and shareholder
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east f fficient for approval.	or the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The each voting group entitled to vote separately on the a	e following statement mendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approve	al
by		 -•
	(voting group)	
Dated	3-15-2021	
Signature	M/m	
(By a d	irector, president or other officer - if directors or officer	ers have not been
	d, by an incorporator fin the hands of a receiver, tr	ustee, or other court
appoin	ed fiduciary by that Aduciary)	
	DENNIS J. MORE	
	(Typed or printed name of person signing)
	PRESIDENT	
	(Title of person signing)	

: . : :