## P09000010092

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

**Division of Corporations** NAME OF CORPORATION: K12 Systems Group, Inc. DOCUMENT NUMBER: P09000016692 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: John Peterson VP Name of Contact Person K12 Systems Group, Inc. Firm/ Company 7857 Drew Circle; Ste 15 Address Fort Myers, FL 33967 City/ State and Zip Code ipeterson@ifssi.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (239 ) 415 4374

Area Code & Daytime Telephone Number Justin Peterson Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & **■\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

K12 Systems Group, Inc.					
(Name of Corporation as cur	rently filed with the Flo	rida Dept. of State)		-	
P09000016692					
(Document Nu	ımber of Corporation (if I	known)		-	
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	5, Florida Statutes, this F	lorida Profit Corporation a	dopts the followin	g amendm	ient(s) to
A. If amending name, enter the new name	of the corporation:				
	•			_The ne	w
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	n "Corp," "Inc," or "C	o". A professional corpor	orated" or the a ation name must	- bbreviatio contain th	n ie
B. Enter new principal office address, if ap	oplicable:	4B Calle Dos			
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		Key West, FL 33040			
			<u>.                                    </u>	-	
C. Enter new mailing address, if applicabl	le:			-	
(Mailing address MAY BE A POST OFF				-	
				<u>.</u> .	
				- 12	¥.v.
D. If amending the registered agent and/or new registered agent and/or the new reg		ss in Florida, enter the na	ne of the	APR 27 PM 12: 50	ECRET
Ni	icholas Osterho	udt		27	52.5 10.5 10.5 10.5 10.5 10.5 10.5 10.5 10
Nume of New Registered Agent	3 Calle Dos		-	PM	공유(c 오)
<del></del>	(Florida stree	t address)	-	ভ	RATA A
V Paristand 06-144 Ke	ey West	-	33040	50	野
New Registered Office Address:	(City)	, Florida	(Zip Code)	-	
New Registered Agent's Signature, if change I hereby accept the appointment as registered Mulufan Signature.		26	ns of the position.		

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	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u> y	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	CEO	Nicholas Osterhoudt	4B Calle Dos Key West, FL 33040
2) Change Add Remove	<u>VP</u>	Robert Hile	7857 Drew Circle, Ste 15 Fort Myers FL 33967
3) × Change Add Remove	VP	Justin Peterson	7857 Drew Circle, Ste 15 Fort Myers FL 33967
4) X Change Add Remove	Sec/Tre/VP	John Peterson	7857 Drew Circle, Ste 15 Fort Myers FL 33967
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Artic (attach additional sheets, if necessary).	(Be specific)
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<del></del>	
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- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	
If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
<del></del>	
· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s)	doption: April 19th 2012
Effective date <u>if applicable</u> :	oril 19th 2012
<u> </u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	for the amendment(s) was/were sufficient for approval
by	,,
• —	(voting group)
The amendment(s) was/were ac action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ac action was not required.	opted by the incorporators without shareholder action and shareholder
Dated April	9th 2012 John Weter VP
select	rector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ited fiduciary by that fiduciary)
	John W Peterson
	(Typed or printed name of person signing)
	Secretary / Treasurer / Vice President
	(Title of person signing)