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SECRETARY OF STATES

ON THE SE

C. LEVIS JUN 20 2014 EXPLINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Think N Ca	ps Academy, Co	orp				
DOCUMENT NUMBER:							
The enclosed Articles	The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:							
	Maria C Carreras						
•	<u>.</u>	Name of Contact Persor	1				
	Think N Caps Aca	ademy, Corp					
		Firm/ Company					
7891 SW 57 Terrace							
	Address						
	Miami, FI 33143						
		City/ State and Zip Code	2				
ma	ruc@bellsouth.net	t					
	E-mail address: (to be us	ed for future annual report	notification)				
For further information concerning this matter, please call:							
Maria C Carreras		_{at (} 305	951 6566				
Name o	Name of Contact Person Area Code & Daytime Telephone Nu		de & 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	□\$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		Street Address					
Amendment Section		Amendment Section					
	sion of Corporations	Division of Corporations					
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



Think N. Caps Academy, Corp

14 JUN -9 PM 1: 19

(Name of Corporation as currently filed with the Florida Dept. of State) Think N Caps Academy, Corp. (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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>	<u>Name</u>	<u>Addres</u> s
1) Change	.V	Susana Lopez	7891 SW 57 Terrace
Add			Miami, Fl 33143
Remove			
2) Change	<u>s</u>	Carlos Lopez	7891 SW 57 Terrace
Add			Miami, FI 33143
Remove			***************************************
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
5) Change			
Remove			
Kenkeve			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
	· · · · · · · · · · · · · · · · · · ·
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
	· · · · · · · · · · · · · · · · · · ·

The date of such amondmen	t(s) adoption: February 1, 2014	SECIE TARY OF STATE	_, if other than the
date this document was signed	l.	-WASION or Com-	_, ii other than the
Effective date <u>if applicable:</u>	February 1, 2014	14 JUN -9 PM 1:19	
Effective date <u>in applicable</u> .	(no more than 90 days after		_
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
	re adopted by the shareholders. The number of ere sufficient for approval.	votes cast for the amendment(s)	
	re approved by the shareholders through voting ged for each voting group entitled to vote separat		
"The number of vote	s east for the amendment(s) was/were sufficient	for approval	
by	(voting group)	,,,	
	(voting group)		
The amendment(s) was/we action was not required.	re adopted by the board of directors without sha	reholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareho	lder action and shareholder	
Dated_Feb	ruary 1, 2014	[[]	
Signature	Maria C Carreras Manu	lament (
(T so	By a director, president or other officer of directly an incorporator – if in the hands of a ppointed fiduciary by that fiduciary)		_
	Maria C Carreras		
	(Typed or printed name	of person signing)	_
	President		
	(Title of person	signing)	-