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DEPARTIENT OF STATE DIVISION OF CONFORATION TABLE ANASSES, FLORIDA

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	YON: EDEN A	ICADEMY & NURSERY INC.	
DOCUMENT NUMBER	· A		
The enclosed Articles of A	I <i>mendment</i> and fee are su	bmitted for filing.	
Please return all correspon	dence concerning this ma	tter to the following:	
ac_	2705 Alle	Williams  Name of Contact Person  Derry & Nursery Inc.  Firm/ Company  Address  Sec, Florida 32312  City/ State and Zip Code  Color State and Inc.  Company  Color State and Inc.  Color State and Inc	
For further information co	ncerning this matter, pleas	se call:	
V		at (850) 590-3647  Area Code & Daytime Telephone Number  payable to the Florida Department of State:	
_			
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status enclosed)	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed)	
	Address	Street Address	
	nent Section of Corporations	Amendment Section Division of Corporations	
P.O. Box	•	Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation of

FILED

E'den Academy & Nursery In	12 JAN 24 AM 10: 10
(Name of Corporation as currently filed with the Flo	rida Dept. of State SECAL MARY OF STATE
(Document Number of Corporation (if k	(nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Flats Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
Eden Academy & Nursery Inc	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	""company," or "incorporated" or the abbreviation o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	N/A
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:  Name of New Registered Agent	is in Florida, enter the name of the
(Florida stree	( adhars)
New Registered Office Address: N/A	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	th and accept the obligations of the position.
Signature of New Registered Age	ent, 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 <math>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: XChange	PT John	Doe		
X Remove	<u>V</u> <u>Mike</u>	e Jones	,	
X Add	<u>SV</u> <u>Sally</u>	Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	11 illian	Address
1) X Change Add Remove	Presiden	t Elgeneth	William te <del>-Pope</del>	2711 Aflen Road Apt Go Jallahossee F1 32312
2) Change Add Remove	· · · · · · · · · · · · · · · · · · ·		······································	
3) Change Add Remove				
4) Change Add Remove				
5) Change Add Remove				
6) Change Add Remove		<del></del>	<del></del>	

amending or adding additional Articles, enter change(s) had additional sheets, if necessary). (Be specific)	r/r
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· ·	
n amendment provides for an exchange, reclassification,	or cancellation of issued shares.
ovisions for implementing the amendment if not contains (if not applicable, indicate N/A)	ed in the amendment itself:
	$\mathcal{N}\mathcal{M}$
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption: 1 24 2012
15017
Effective date if applicable: (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by,"
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 1-24-2012 PSD 1
Signature Clynelle Att Fore
(By a director, president 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
appointed fiduciary by that fiduciary)
Elgenette for Williams
Oyped or printed name of person signing)
Hesident
(Title of person signing)