P11000 109174

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TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

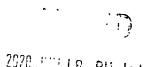
NAME OF CORPORATION: BA Academy, Inc. DOCUMENT NUMBER: P11000109174 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **David Paton** Name of Contact Person BA Academy, Inc. Firm! Company 5753 Hwy 85 North #6670 Address Crestview, FL 32536 City/ State and Zip Code davidpatonsr@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407) 234-9257

Area Code & Daytime Telephone Number David Paton 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 & □S43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, Ft. 32303

Articles of Amendment Articles of Incorporation of



Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

2520. ***: 18 PH 1: 41

BA Academy, inc.	
(Name of Corporati	on as currently filed with the Florida Dept. of State)
P11000109174	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Floridits Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the c	orporation:
name must be distinguishable and contain the word "c "Inc." or Co." or the designation "Corp," "Inc. "chartered," "professional association," or the abbre	The new orporation," "company," or "incorporated" or the abbreviation "Corp.," " or "Ca". A professional corporation name must comain the word eviation "P.4"
B. Enter new principal office address, if applicable	5753 Hwy 85 North
(Principal office address <u>MUST BE A STREET AD</u>	
	Crestview, FL 32536
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	5753 Hwy 85 North
	#6670
	Crestview, FL 32536
D. If amending the registered agent and/or registe	red office address in Florida, enter the name of the
new registered agent and/or the new registered	
Name of New Registered Agent Registered	Agents, Inc. / Bill Havne
	N STE 300
	(Florida street address)
St. Petersbi	irg , 33702
New Registered Office Address;	, Florida // // // // // // // // // // // // //
	·
New Registered Agent's Signature, if changing Re-	
I hereby accept the appointment as registered agent.	I am familiar with and accept the abligations of the position
Rill Han	ne-
	ature 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)

Example:

Please note the officer director title by the first letter of the office title:

P = President; \tilde{V} = Vice President; \tilde{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

X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	CEO	Paton, Laura J	5753 Hwy 85 North
Add		-	#6670
Remove			Crestview, FL 32536
2) X Change	РТ	Paton, David A	5753 Hwy 85 North
Add			#6670
Remove 3.1 Change			Crestview, FL 32536
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	i. (Be specific)
	, 7, 1 to
**	
1 · 1 · 1	
If an amendment provides for an ex-	change, reclassification, or cancellation of issued shares.
provisions for implementing the an	nendment if not contained in the amendment itself:
(if not applicable, indicate NA)	

	adoption:	, 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 document's effective date on the I	block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be fisted as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sharehol	der action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amer sufficient for approval.	odment(s)
	pproved by the shareholders through voting groups. The following or each voting group emitted to vote separately on the amendment!	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
bv	<u>,•</u>	
	tyoting groups	
June 16. Dated	2020 N 1 P-A-	
selec	director, president or other officer – if directors or officers have no ed, by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	
	David Paton	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	