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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Internation		demy Corp
DOCUMENT NUMBER: P130000110)4	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Bryan Shaffer		
	Name of Contact Person	
International Sci	ence Academy	Corp
	Firm/ Company	
5610 W. Atlantic	Ave APT 206	
	Address	
Delray Beach Fl		
	City/ State and Zip Code	
bshaffe2@gmail.co	m	
E-mail address: (to be use	ed for future annual report t	notification)
For further information concerning this matter, please	. call:	
For furtier information concerning and matter, prease		
Bryan Shaffer	at (561	414-5257 le & Daytime Telephone Number
Name of Contact Person	Area Cod	le & Daytime Telephone Number
Enclosed is a check for the following amount made pr	ayable to the Florida Depar	rtment of State:
\$35 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amendi Division Clifton 2661 Ex	Address ment Section n of Corporations Building secutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation

International	Science	Academy	√ Corp
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(Name of Corporation as currently filed with th	e Florida Dept. of State)	
P13000001104		
(Document Number of Corporation	n (if known)	
tursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	nis Florida Profit Corporation adopts th	e following amendment(s) to
. If amending name, enter the new name of the corporation:		
		The new
ame must be distinguishable and contain the word "corpora Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o ord "chartered," "professional association," or the abbreviatio	r "Co". A professional corporation na	
. Enter new principal office address, if applicable:	465 NE Spanish Rive	er Blvd
Principal office address <u>MUST BE A STREET ADDRESS</u>)	Boca Raton Fl 334	31
. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	465 NE Spanish Rive	er Blvd
	Boca Raton FI 334	31
. If amending the registered agent and/or registered office a	ddress in Florida, enter the name of th	
. If amending the registered agent and/or registered office action new registered agent and/or the new registered office addronomics. Name of New Registered Agent	ddress in Fiorida, enter the name of the ess;	
. If amending the registered agent and/or registered office action new registered agent and/or the new registered office address Name of New Registered Agent	ddress in Florida, enter the name of th	
. If amending the registered agent and/or registered office as new registered agent and/or the new registered office address: Name of New Registered Agent (Florida New Registered Office Address:	ddress in Florida, enter the name of the ess; street address) , Florida	
. If amending the registered agent and/or registered office as new registered agent and/or the new registered office address: Name of New Registered Agent (Floridation New Registered Office Address:	ddress in Florida, enter the name of the ess; street address) , Florida (Zip)	<u>e</u>
. If amending the registered agent and/or registered office as new registered agent and/or the new registered office address: Name of New Registered Agent	ddress in Florida, enter the name of the ess; street address) jty) (Zip	e Code)
. If amending the registered agent and/or registered office as new registered agent and/or the new registered office address: Name of New Registered Agent	ddress in Florida, enter the name of the ess; street address) jty) (Zip	Code) position.
Name of New Registered Agent New Registered Office Address: (Co. 16) New Registered Office Address: (Co. 16) New Registered Agent's Signature, if changing Registered Agent Agent's Signature Agent. I am familia	ddress in Florida, enter the name of the ess; street address) jty) (Zip	Code) position.
Name of New Registered Agent New Registered Office Address: (Co. 1) (Co.	ddress in Florida, enter the name of the ess; street address) ity) (Zip) ent: ar with and accept the obligations 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)

Example:

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.

X Change	<u>PT</u> <u>John</u>	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>P,D</u>	Holes, Christian M	
Add			
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			/
Remove			1-1-
4) Change			1-#
Add			/
Remove			· -
5) Change		1	
Add		1	1
Remove		V	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
6) Change			****
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
(Anath additional sheets, if necessary). (De specific)
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption: January 14 2013
1 / //\
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)
(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 January 14 2013
B
Signature (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)
Bryan Shaffer
(Typed or printed name of person signing)
President
(Title of person signing)