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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

_{RATION:} Navigant C	ollege Advisors	of Jax, Inc.		
BER:		· · · · · · · · · · · · · · · · · · ·		
of Amendment and fee are su	abmitted for filing.			
spondence concerning this ma	tter to the following:			
Michele Larson				
1845 Town Cente	• •	ROMANO UD		
	Address	1.301001119 110		
Elemina Island E				
Tierning Island, I				
	City/ State and Zip Cod	e		
hele@collegefun	dingarchitects.co	om		
E-mail address: (to be u	sed for future annual report	notification)		
n concerning this matter, pleas	se call:			
Michele Larson		, 625-0299		
of Contact Person	Area Code & Daytime Telephone Number			
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t the tonowing amount made	payable to the Florida Depo	artificity of State.		
☐\$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		Address		
Amendment Section		Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		Building		
	SER: of Amendment and fee are subspondence concerning this matchele Larson College Funding 1845 Town Center Fleming Island, Funding Island	Michele Larson Name of Contact Perso College Funding Architects Firm/ Company 1845 Town Center Blvd, Suite G Address Fleming Island, FL 32003 City/ State and Zip Cod E-mail address: (to be used for future annual report n concerning this matter, please call: On of Contact Person r the following amount made payable to the Florida Deport at (904 Area Co The following amount made payable to the Florida Deport Certificate of Status Certified Copy (Additional copy is enclosed) Street Amend Sing Address Endment Section Sing Address Endment Section Sing Address Endment Section Sing Address Endment Section Sing Address Certified Copy (Additional copy is enclosed)		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation Navigant College Advisors of Jax しいし (Name of Corporation as currently filed with the Florida Dept. of State) (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: College Funding Architects, Inc. 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." 1845 Town Center Blvd. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Fleming Island, FL 32003 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 1845 Town Center BIVD Sv. teG, BLOG 110 New Registered Office Address: 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			
Add Remove			
2) Change			
Add			
Remove			
3) Change			
Add Remove			
4) Change	·		
Add Remove			
5) Change			
Add			,
Remove			
6) Change			
Add			<u> </u>
Remove			

	(Be specific)
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an in the amendment itself:

date this document was signed.	, if other than the
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)	
(voling 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 May 22, 2014	
Dated May 22, 2014 Signature Musel Larson	
(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)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Resident	
(Title of person signing)	