

OCT/07/2013 MON 12:24 PM

FAX No.

P.002

10/4/13

Division of Corporations

Florida Department of State

Division of Corporations

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EXAMINER

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October 4, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SOUTHPOINT ACADEMY EES INC
11483 SW 181 ST
MIAMI, FL 33157

SUBJECT: SOUTHPOINT ACADEMY EES INC
REF: P13000011685

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

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EXAMINER

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13 OCT -4 PM 4:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDAArticles of Amendment
to
Articles of Incorporation
or

SOUTHPOINT ACADEMY EES INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P13000011685

(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:

The new 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**)27835 SOUTH DIXIE HWY
HOMESTEAD, FL 33021**C. Enter new mailing address, if applicable:**
(Mailing address **MAY BE A POST OFFICE BOX**)27835 SOUTH DIXIE HWY
HOMESTEAD, FL 33021**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 _____
(City) (Zip Code)**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:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	ST	EMILY ALMEIDA	11483 SW 181 ST MIAMI, FL 33157
2) ____ Change <input checked="" type="checkbox"/> Add ____ Remove	P	ELIZABETH SANTANA	11483 SW 181 ST MIAMI, FL 33157
3) ____ Change ____ Add ____ Remove	____	____	____
4) ____ Change ____ Add ____ Remove	____	____	____
5) ____ Change ____ Add ____ Remove	____	____	____
6) ____ Change ____ Add ____ Remove	____	____	____

P. 005

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The date of each amendment(s) adoption: 10/02/2013
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

if other than the

Effective date if applicable: 07/12/2013

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated

10/3/2013

Signature

Emily Almeida

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Emily Almeida

(Typed or printed name of person signing)

President

(Title of person signing)