P13000018930

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TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: MIAMI GARDENS	LEARNING CENTER C	ORP.
DOCUMENT NUME	P13000018930		
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corres	spondence concerning this mat	ter to the following:	
	Diego J. Sirulnik		
		Name of Contact Person	
	Alex D. Sirulnik, P.A.		
		Firm/ Company	
	2199 Ponce de Leon Blvd., S	nite 301	
		Address	
	Coral Gables, Florida 33134		
		City/ State and Zip Code	
	djs@sirulniklaw.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Diego J. Sirulnik	at () 443-7211		443-7211
Name of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 8Tallahassee, FL 32303		lment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

(Name of Corporation	as currently filed with the Flori	da Dept. of State)
P13000018930		
(Documer	nt Number of Corporation (if know	vn)
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	statutes, this Florida Profit Corpor	ration adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:	
name must he distinguishable and contain the word "corp" "Inc.," or Co.," or the designation "Corp," "Inc." o "chartered," "professional association," or the abbrevia	or "Co". A professional corpor	The new orated" or the abbreviation "Corp.," cation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	<u>(ESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX))	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	d office address in Florida, enter fice address:	the name of the
Name of New Registered Agent		<u>. </u>
	(Florida street address)	
New Registered Office Address:	(City)	Florida(Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I	stered Agent: am familiar with and accept the oi	bligations of the position.
•	ure of New Registered Agent, if ch	anging 2023 NO
Check if applicable The amendment(s) is/are being filed pursuant to s. 60)7.0120 (11) (e), F.S.	*-11 E1 Y21 A 1/23 OF

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>	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>	Address
1) Change	Р	Gema Gallo	16600 NW 25 Ave
Add			Miami Gardens, FL 33054
Remove 2) Change	P	Juan Pablo Pinto Valverde	16600 NW 25 Ave
X Add			Miami Gardens, FL 33054
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional A Attach additional sheets, if necessary,). (Be specific)				
		<u> </u>			
					
<u> </u>					
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		*** *			
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f an amendment provides for an e	vohanna ruolassifi	estion or cance	llation of issued sl	19705	
provisions for implementing the ar	mendment if not c	ontained in the	mendment itself:		
(if not applicable, indicate N/A)	,				
	·				
					
					
					_

The date of each amendment(s) 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 block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
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)
November 20, 2023
Dated
Signature
(By a director, president synther officer – if directors of officers have not been
selected, by an incorporator - if in the hards of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)
Juan Pablo Pinto Valverde
(Typed or printed name of person signing)
President

(Title of person signing)