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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: EIKON UNIVERS	SITY INTERNATIONAL I	EDUCATION CORP
DOCUMENT NUMB	ER: P16000000624		
The enclosed Articles a	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
,	VANESSA DE SOUZA MO	RAES SPINELLIS	
.		Name of Contact Perso	n
J	EIKON UNIVERSITY INTE	ERNATIONAL EDUCATI	ON CORP
-		Firm/ Company	
(5901 TPC DR UNIT 350		
-		Address	
(ORLANDO FL 32822		
-		City/ State and Zip Cod	e
SPINE	LLIS.VANESSA@EIKON.	UNIVERSITY	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
VANESSA SPINELLI	S	ai (321	, 368 - 6222
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
☐ \$35 Filing Fee	\$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

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



Articles of Amendment to Articles of Incorporation of

EIKON UNIVERSITY INTERNATIONAL EDUCATION CORP

(Name of Corporation as curr	ently filed with the Florida Dept. of State)	
P16000000624		
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation:	this Florida Profit Corporation adopts the followi	ng amendment(s)
A. If amending name, enter the new name of the corporation	<u>:</u>	
N/A		The new
name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," oword "chartered," "professional association," or the abbreviation.	or "Co". A professional corporation name musi	abbreviation
B. Enter new principal office address, if applicable:	6901 TPC DR UNIT 350	
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO FL 32822	
C. Enter new mailing address, if applicable:	6901 TPC DR UNIT 350	2019 AUG
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	ORLANDO FL 32822	22
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add		M 9: 23
Name of New Registered Agent VANESSA DE SOUZ	A MORAES SPINELLIS	
	6901 TPC DR UNIT 350	
(Florid	a street address)	
New Registered Office Address: ORLANDO	, Florida ³²⁸²²	
	(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.



to

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)

Remove

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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	S	VANESSA DE SOUZA MORAES S	2669 SAN SIMEON WAY
X Add			KISSIMMEE FL 34741
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	<u> </u>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			



Attach additional sheets. if necessary).	cles, enter change(s) here: (Be specific)
	
N-1155 L.,	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
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provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:



	N/A	
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
N/A		
Effective date if applicable:		
	(no more than 90 days after umandment file date)	
Note: If the date inserted in this bidocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amend ficient for approval.	lment(s)
☐ The amendment(s) was/were apparately provided for	roved by the shareholders through voting groups. The following seach voting group entitled to vote separately on the amendment(s	statement s):
	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopaction was not required.	oted by the board of directors without shareholder action and shar	
The amendment(s) was/were adopaction was not required.	oted by the incorporators without shareholder action and sharehol	der
08/06/2019 Dated	——————————————————————————————————————	
Signature		
selected appointe	rector, president or other officer - if directors or officers have not, by an incorporator ti in the hands of a receiver, trustee, or other diductions by that fiductions	been er court
· 	OSE CARLOS DE CARVALHO ALMEIDA	
	(Typed or printed name of person signing)	
i	PRESIDENT	
•	(Title of person signing)	