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COVER LETTER

TO: Amendment Section

Division of Corporat	ions			
		ontensori Sch	ne a)	
DOCUMENT NUMBER	: P16000	012753		
The enclosed Articles of Articles	Amendment and fee are su	bmitted for filing.		
Please return all correspor	ndence concerning this ma	tter to the following:		
_		Name of Contact Person		
	EPD	Firm/Company	chool	
		Firm/ Company	-	
	650	7 Su 28 54		
		redress		
	Pila	City/ State and Zip Code	5	
		City/ State and Zip Code	2	
	175/20	vices @ graci).	5 A Z	
	E-mail address: (to be us	sed for future annual report	notification)	
For further information co	-			
Oscar	R.Orlega	at(}8€	333 9 5 2 3 dc & Daytime Telephone Number	
Name of C	ontact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the	: following amount made p	payable to the Florida Depa	ertment of State:	
□ \$35 Filing Fee	S43.75 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		Street Address		
	nent Section	Amendment Section		
Divisior P.O. Bo	of Corporations x 6327	Division of Corporations Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

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

P160000 12753
(Document Number of Corporation (if known)

Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> its Articles of Incorporation:	adopts the fo	llowing a	mendinei
A. If amending name, enter the new name of the corporation:			
EPD School Corp		TI	ie new
name must be distinguishable and contain the word "corporation," "company," or "inco "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corp word "chartered," "professional association," or the abbreviation "P.A."	rporated" or oration name	the abbr	eviation tain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			
C. Enter new mailing address, if applicable:		·	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
D. If amending the registered agent and/or registered office address in Florida, enter the remaining the registered agent and/or the new registered office address: Name of New Registered Agent	rame of the		
(Florida street address)			
New Registered Office Address: (City)	, Florida	(Zip Cod	(c)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligation of the second	FALLAH	ition.	
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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 <math>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	\underline{V}	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		Oscar R. Orte	
Add			Diami, F1 33155
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additiona Attach <i>additional sheets, if necesso</i>	ny). (Be specific				
					
					
				· ·	
				·	
f an amendment proyides for an	avahanga vooluss	ification ar asno	dation of icensels	hm	
provisions for implementing the	amendment if not	contained in the	amendment itself:	nares,	
(if not applicable, indicate Ni	A)				
					

, if other than the
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 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 east for the amendment(s) was/were sufficient for approval
by (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
Dated05/19/17
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)
Maria L. Castillo
(Typed or printed name of person signing)
President
(Title of person signing)