P170000(25)

(Re	equestor's Name)	
(Ac	idress)	··-
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Ви	usiness Entity Nan	ne)
(Do	ocument Number)	_
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COVER LETTER

Division of Corporations	
NAME OF CORPORATION: MER IT Prepara tory Academy he	,
DOCUMENT NUMBER: \$17000006251	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
TRACY APATA Name of Contact Person	•
Merit Preparatory Academy, Inc	
813 E. 109th Ave	
Address	
Tampa, PL 33612 City/ State and Zip Code	-
City/ State and Zip Code	
E-mail address: (to be used for future annual report notification)	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
TRAIL APATA (813) 846-243	3
TRACY APATA at (213) 246-243 Name of Contact Person Area Code & Daytime Telephone Number	<u></u>
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)	
Mailing Address Street Address	

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

TO: Amendment Section

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

Articles of Amendment to

Articles of Incorporation

17 APR 10 AM 9:43

(Name of Corporati	on as currently filed with the Florida Dept. of State)	
9170000062		
	ent Number of Corporation (if known)	•
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment	nent(s) to
A. If amending name, enter the new name of the co	rporation:	
	The ne	
	d "corporation," "company," or "incorporated" or the abbreviatic " "Inc," or "Co". A professional corporation name must contain th abbreviation "P.A."	
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>		-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	- -
D. If amending the registered agent and/or register new registered agent and/or the new registered		•
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, Florida	_
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Reg	istered 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.

X Change	<u>PT</u> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CEO	FASASI APATA	813 E. 109Th AVE
X Add			Tampa, fl 336/2
Remove			
2) Change	D	TEKILA LINDSEY	808 E. Richmere 8+ Tampo, F1 33612
Add			Tampo, FL 33612
Remove	- 1		
3) 🔀 Change	P/D	TRAY MATATA	308 E. Richmere st
Add			Tampo, F1 33612
Remove		•	
4) Change			·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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<u>provisions fa</u>	nent provides for an experimplementing the an opplicable, indicate N/A)	<u>mendment if n</u>	ot contained	cancellation of in the amendm	of issued shares nent itself:	<u>.</u>	
		€V	(A-				
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The date of each amendment(s) adoption: HPG L6, 2017 date this document was signed.	, if other than the
Effective date if applicable: 4/15/2017 (no more than 90 days after amendment file date)	<u></u>
' (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 with 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 cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(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 action was not required.	
Dated 4/6/2012	
Signature Dacid Apalo	
(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)	
TO ACY OF ADATA	
(Typed or printed name of person signing)	·
President	
(Title of person signing)	