Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190000660053)))



H190000660053ABC.

	DO NOT hit the REFRESH/RELOAD button on your browser from this so will generate another cover sheet.		ij	_ "1]
To			135	
	Division of Corporations	.45	<b>.</b>	i 
	Fax Number : (850)617-6380	,		, ,
	••••			-
Fr	om:	٠.,	3	
	Account Name : LAZARUS CORPORATE FILING SERVICE, INC.	***	ப	
	Account Number : I20000000019		e,	
	Phone : (305)552-5973 Fax Number : (305)675-5944			
	Fax Number : (305)675-5944			
5:20	*Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.  Email Address:		S T/	ALL
20 EEE	annual report mailings. Enter only one email address please.	<b>**</b>	S TA	
26 PM 5: 20	annual report mailings. Enter only one email address please.  Email Address:  COR AMND/RESTATE/CORRECT OR O/D RESIGN	**  :		
26 PM 5: 20	annual report mailings. Enter only one email address please.  Email Address:  COR AMND/RESTATE/CORRECT OR O/D RESIGN  MCA BUSINESS & POSTGRADUATE SCHOOL COR	**  :		
26 PM 5: 20	annual report mailings. Enter only one email address please.  Email Address:  COR AMND/RESTATE/CORRECT OR O/D RESIGN	**  :		
6 PH 5: 20	annual report mailings. Enter only one email address please.  Email Address:  COR AMND/RESTATE/CORRECT OR O/D RESIGN  MCA BUSINESS & POSTGRADUATE SCHOOL COR	**  :		
26 PM 5: 20	COR AMND/RESTATE/CORRECT OR O/D RESIGN MCA BUSINESS & POSTGRADUATE SCHOOL COR  Certificate of Status  Certified Copy  0	**  :		<b>AL</b> L 272
26 PM 5: 20	annual report mailings. Enter only one email address please.  Email Address:  COR AMND/RESTATE/CORRECT OR O/D RESIGN  MCA BUSINESS & POSTGRADUATE SCHOOL COR  Certificate of Status  0	**  :		

Electronic Filing Menu

Corporate Filing Menu

Help

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dent. of State)  (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. Hamending Baine, cater the new name of the corporation:  "A. Hamending Baine, cater the new name of the corporation:  "A. Hamending Baine, cater the new name of the corporation:  "A. Hamending Baine, cater the new name of the corporation:  "Corp.," "Inc.," or "Co.," 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)  C. Enter new malling address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  D. Hamending the registered agent sadior the new 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 sweet address)  New Registered Office Address:  (Ciq)  (Exp Code)  New Registered Agent's Signature, if changing Registered Agent:  1 hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	MCA BUSINESS & POSTGRADUATE SCHOOL CORP				
(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 Basse, enter the new name of the corporation:  1/2  1/3  1/4  1/4  1/4  1/4  1/4  1/4  1/4	(Name of Corporation as current	ly filed with the Florida	Dent. of State)		
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 same, enter the new name of the corporation:  10	P17000041166				, .
its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  1/2  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)  C. Enter new mailing address, if applicable: (Mailing address MAT BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, catter the name of the new registered agent and/or the new registered office address;  Name of New Registered Agent  (Florida street address)  (City)  (Exp Code)  New Registered Office Address:  (City)	(Document Number of	of Corporation (if known)			
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)  C. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  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  What is a professional corporation of the new registered office address in Florida, enter the name of the new registered Agent  (Cip)  (Cip)  (Cip Code)  New Registered Office Address:  (Cip)  (Cip Code)		Florida Profit Corporatio	on adopts the followin	g amendme	ent(s) to
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 corporated or the abbreviation "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)  C. Enter new malling address, if applicable: (Mailing address MAT BE A POST OFFICE BOX)  D. If appending the registered syent sadjor registered office address in Florida, enter the name of the new registered agent and/or the new registered affice address:  Name of New Registered Agent  (Florida swest address)  New Registered Office Address:  (City)  (Zap Code)  New Registered Agent's Signature, If changing Registered Agent;	A. If amending name, enter the new name of the corporation:				
name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "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)  C. Enter new malling address, if applicable: (Malling address MAY BE A POST OFFICE BOX)  D. If supending 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  (Cip)  (Cip)  New Registered Office Address:  (Cip)  New Registered Agent's Signature, if changing Registered Agent;	n/a			The now	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  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:  (City)  (City)  (Zip Code)	"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or	"Co". A professional cor		bbreviation	n
(Principal office address MUST BE A STREET ADDRESS)  C. Rater new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  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 Naw Registered Agent  (Florida street address)  New Registered Office Address:  (City)	B. Enter new principal office address, if applicable:	N/A .		11-	:5
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:  (City)  (Zip Code)					) FF .
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:  (City)  (Zip Code)			<del></del>	· :	ר יגו
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:  (City)  (Zip Code)		<del></del>			ે જે દ્
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:  (City)  (City)	C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a			三三
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:  (City)  (City)  (City)  New Registered Agent's Signature, if changing Registered Agent:		<del></del> -		:	
Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	. •		<del></del>		95
Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:		· ·		<del></del> .	
Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	D. If amending the registered agent and/or registered office add	ress in Florida, enter the	name of the		
New Registered Office Address:   Florida   (City)   (Zip Code)	new registered agent and/or the new registered office addres	<u>5:</u>	•		٠.
New Registered Office Address:  (City)  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	Name of New Registered Agent	·		_	
New Registered Office Address:  (City)  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:					
(City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	(Florida st	reet address)		_	
(City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	New Registered Office Address:		Florida		
		(City)		Code)	,
			,		
			utions of the position.		
•			-		•
	·				
Signature of New Registered Agent, if changing	Clause or aCM	Danistan - 1 4 1 (C-1		<b>-</b> · ·	

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 I</u>					
X Remove	Y	Mike .	<u>Iones</u>				
X Add	<u>sv</u>	Sally S	Smith	<i>,</i>			
Type of Action (Check One)	Title		<u>Name</u>	Address			
I) Change	D	<u>.</u> .	CARRALERO PENA, EFRAIN	4895 PIMILICO CT			
Add				WEST PALM BEACH, FL 33415			
X Remove							
2) Change	D .	· ·	YANEZ PAEZ, EDWIN VINICIO	4895 PIMLICO CT			
X Add		•		WEST PALM BEACH, FL 33415			
Remove							
3) Change		_	<u> </u>				
Add		-					
Remove			•	· · · · · · · · · · · · · · · · · · ·			
4) Change				. •			
Add							
Remove	٠						
5) Change	•						
Add	•						
Remove							
6) Change		<b>-</b> .					
Add		•		· · · · · · · · · · · · · · · · · · ·			
Damoria			•	•			

	. (Be specific)
· · · · · · · · · · · · · · · · · · ·	
,	
<del> </del>	
•	,
<u> </u>	•
<del></del> -	
,	
<del></del>	
. <del></del>	
in amendment provides for an exc	
an amendment provides for an exc rovisions for implementing the nm (if not applicable, indicate N/A)	bange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
an amendment provides for an exc rovisions for implementing the ame (if not applicable, indicate N/A)	
an amendment provides for an exc rovisions for implementias the am (if not applicable, indicate N/A)	
an amendment provides for an exc rovisions for implementing the ame (if not applicable, indicate N/A)	
an amendment provides for an exc rovisions for implementing the ame (if not applicable, indicate N/A)	
an amendment provides for an exc rovisions for implementiag the ame (if not applicable, indicate N/A)	
an amendment provides for an exc rovisions for implementiag the ame (if not applicable, indicate N/A)	
an amendment provides for an exc covisions for implementing the ame (if not applicable, indicate N/A)	
an amendment provides for an exc rovisions for implementing the ame (if not applicable, indicate N/A)	
an amendment provides for an exc rovisions for implementing the ame (if not applicable, indicate N/A)	
an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	
an amendment provides for an excrevisions for implementing the ame (if not applicable, indicate N/A)	bange, reclassification, or cancellation of issued shares, endment if not contained in the groendment itself:
an amendment provides for an exc rovisions for implementiae the am (if not applicable, indicate N/A)	bange, reclassification, or cancellation of issued shares, endment if not contained in the groendment itself:
an amendment provides for an exc rovisions for implementiae the am (if not applicable, indicate N/A)	bange, reclassification, or cancellation of issued shares, endment if not contained in the groendment itself:

The date of each amendmen date this document was signed	f(s) adoption:	· · · · · · · · · · · · · · · · · · ·	<u>.</u>	•	_, if other (	ban dhe j
Effective date if applicable:	n/a		· .			
	(по more tha	n 90 days after amendi	ment file dute)	- : . : .		: .
Note: If the date inserted in document's effective date on the	this block does not meet the ap he Department of State's records	plicable statutory filing	g requirements,	this date will	not be listed	as the
Adoption of Amendment(s)	(CHECK ONE)		·	·		
by the shareholders was/we		•			·	
The amendment(s) was/wer must be separately provide	e approved by the shareholders t d for each voting group entitled	hrough voting groups to vote separately on th	The following : he amendment(s	statement s):		
"The number of votes	cast for the amendment(s) was/v	were sufficient for appro	pval		•	
by		÷				
	(voting group)					
action was not requiren.	e adopted by the board of directors was adopted by the incorporators w					
DatedSignature	Muniform	· · ·				· .
sel:	y a direction, president or other of ected, by an incorporator – if in politted fiduciary by that fiduciar	the hands of a receiver.	fficers have not trustee, or othe	been er court	· (	
	CALZADILIA AVILA, M	IAIKEL		•		
	(Typed or printe	d name of person signi	ng)		<del></del>	
	PRESIDENT/ DIRECTOR	• •	-			
	(Titi	e of person signing)			<del></del>	