## P170000(056029)

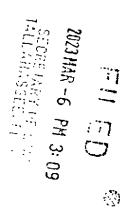
(Re	questor's Name)	
(Ad	dress)	
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/Ci+	y/State/Zip/Phone #)	<del></del>
(Cit	y/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Name)	
<b>\</b>		
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
J. HORNE		
MAY 1 9 2023		

Office Use Only



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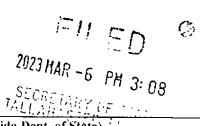
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: MIAMI CLIPPER	S IV INC	
	1BER: P17000065629		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	itter to the following:	
	JOEL EIRAS		
		Name of Contact Person	n
	MIAMI CLIPPERS IV INC		
		Firm/ Company	
	920 NE 33RD TERRACE U	• •	
		Address	
	HOMESTEAD, FL 33033		
		City/ State and Zip Cod	e
	EIRASJOEL@YAHOO.CO	М	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call:	
MICHAEL FISH		at ( 305	279-8484
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check t	for the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status
Mailing Address  Amendment Section  Division of Corporations			Address
			lment Section on of Corporations
	D. Box 6327		entre of Tallahassee
Tallahassee, FL 32314			N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of



MIAMI CLIPPERS IV INC

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

(Name of Corporat	ion as currently filed wit	h the Florida Dept. of St	ate)
P17000065629			
(Досш	ment Number of Corporati	on (if known)	·-
Pursuant to the provisions of section 607,1006, Florid its Articles of Incorporation:	a Statutes, this Florida Pr	ofit Corporation adopts th	ne following amendment(s) to
A. If amending name, enter the new name of the c	orporation:		٠
THE BARBER SCHOLAR INC			The new
name must be distinguishable and contain the word "c "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbro	" or "Co". A professio	or "incorporated" or the nal corporation name m	abbreviation "Corp"
B. Enter new principal office address, if applicable	e:		
(Principal office address <u>MUST BE A STREET ADI</u>	DRESS )		
		<u> </u>	
		· <u>-</u>	
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>		
		<del> </del>	
D. If amending the registered agent and/or registe	rad affice address in Fla	ride anter the name of t	
new registered agent and/or the new registered		ida, enter the name of the	<u>ne</u>
Name of New Registered Agent			
		_	
	(Florida street address)		
New Registered Office Address:		, Floric	la
	(City)		(Zip Code)
Now Desirtand Aport's Countries if the sain Daniel			
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	<u>istered Agent:</u> I am familiar with and ac	cept the obligations of the	position.
			•
	ature of New Registered A	unit if aliminities	
Sign	aure oj ivew Registered A	gem, y 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 Doc 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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
<u>X</u> Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change		<del>_</del>		
Add				
Remove				
2) Change				
Add				
Remove 3 ) Change		_		
Add				
Remove				
4) Change		<del></del>		
Add				
Remove				
51 Change				
Add				
Remove				
6) Change				
Add		_		
Remove				

A	amending or adding additional Articles, enter change(s) here: tach additional sheets, if necessary). (Be specific)
•••	
	<del> </del>
_	<del></del>
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	in amendment provides for an exchange, reclassification, or cancellation of issued shares,
P	ovisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
_	

The date of each amendment(s) ad date this document was signed.	option:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blocoument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were adopaction was not required.	sted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
must be separately provided for e	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):  or the amendment(s) was/were sufficient for approval
by	
", <u> </u>	(voting group)
Signature	28/2023 July Gio
selected,/	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)
Je	DEL EIRAS
	(Typed or printed name of person signing)
P	RESIDENT
-	(Title of person signing)