(Requestor's Name)	
(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations heschool Academy, INC NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & ☐ \$35 Filing Fee □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment to

Articles of Incorporation

Kido World Proschool Academy TWC
(Name of Corporation as currently filed with the Florida Dept. of State)
P180000 4758
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
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 MAY BE A POST OFFICE BOX) PO BOX 772529 Olamo, FL 32877 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
Nume of New Registerea Agent
(Florida street address)
New Registered Office Address: Florida, Florida
(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. 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.

Example:	, and ban, bill	, 0, 4, 4, 1144,	
X Change	PT John I	Doe	
X Remove	V Mike	Jones	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change		Servia Galva	2008 W. Superior St. Chicago IL 60612
Add Remove			Chicago IL 60612
2) Change	<u>SV</u>	Karen Galva	2008 W. Superior ST. Chicago IL 60612
Add Remove	, /	Illand, Cali	9
3) Change Add	_V_	Wendy Galva	2121 S. Hiawassee Rd Orlando, FL 32835
Remove	. /	. / /	
4) Change Add	SV	Wendy Galva	2121 S. HIAWASSEE RO Orlando, FL 32835
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
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If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
	
 	

The date of each amendment(s) adoption: _ date this document was signed.	10/23/2	2018	, if other than the
Effective date if applicable:		·	
	(no more than 90 days	after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department of		statutory filing requirements, this dat	e will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)		
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		per of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by t must be separately provided for each votin			nı
"The number of votes cast for the ame	endment(s) was/were suff	cient for approval	
by		77	
(ve	oting group)		
The amendment(s) was/were adopted by the action was not required.	e board of directors witho	ut shareholder action and shareholde	r
☐ The amendment(s) was/were adopted by the action was not required.	c incorporators without sh	areholder action and shareholder	
Dated18 Z=	3/2018		
Signature	Wgal		
(By a director, pro		f directors or officers have not been	
	corporator – if in the hand ry by that fiduciary)	s of a receiver, trustee, or other court	
	Wendy	Calva	
	(Typed or printed name	of person signing)	
	Pres	Sident	
	(Title of ners	on cianina)	•