P18000018527

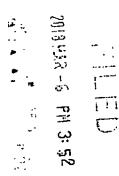
(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Cashiess Linky Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



400309980964

03/06/18--01020--030 **35.00



Hound

MAR 1 2 2018 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

.

NAME OF CORPORATION: WEE EXPLO	ORE ACADEMY, INC.		
DOCUMENT NUMBER: <u>P18000018527</u>			
The enclosed Articles of Amendment and fee are	e submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
	NEER PERSAUD		
	Name of Contact Person		
 	Firm/ Company		
	• •		
422 LK DAISY DR			
	Address		
WINTER HAVEN, FL 33884			
	City/ State and Zip Code		
N	NEERPERSAUD@YAHOO.COM		
	e used for future annual report notification)		
	• ,		
For further information concerning this matter, pl	lease call:		
,			
NEER PERSAUD	at (863) 521-4898		
Name of Contact Person	Area Code & Daytime Telephone Number		
Parlanding 1 1 C of CH .			
Enclosed is a check for the following amount ma-	de payable to the Florida Department of State:		
☑ \$35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status			
Mailing Address	Street Address		
Amendment Section	Amendment Section		
Division of Corporations P.O. Box 6327	Division of Corporations		
Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle		
Tallahassee, FL 32314 2001 Executive Center Circle Tallahassee, FL 32301			

Articles of Amendment Articles of Incorporation



	Articles of Amendment		19.
•	to Articles of Incorporation		30,900
	of	•	, 'S
	WEE EXPLORE ACADEM	<u>·</u>	
(<u>Name of Co</u>	rporation as currently filed with	the Florida Dept. of State)	
	P18000018527		<u> </u>
'	(Document Number of Corporation	n (II known)	· .
rsuant to the provisions of section 607.1006, Articles of Incorporation:	Florida Statutes, this Florida Pro	fit Corporation adopts the follo	wing amendme
•			
. If amending name, enter the new name o	·		
L. Barrell II.	N/A		The new
me must be distinguishable and contain to orp., " "Inc.," or Co.," or the designation	"Corp," "Inc," or "Co". A pro-		
	or the abbreviation "P.A."		
rd "chartered," "professional association,"		N/A	
ord "chartered," "professional association," Enter new principal office address, if app	olicable:	N/A N/A	
ord "chartered," "professional association," Enter new principal office address, if app	olicable:		
ord "chartered," "professional association," Enter new principal office address, if apportunities of the principal office address MUST BE A STREE	olicable: ET ADDRESS)	N/A	
ord "chartered," "professional association," Enter new principal office address, if apprincipal office address MUST BE A STREE Enter new mailing address, if applicable	olicable: ET ADDRESS)	N/A N/A	
ord "chartered," "professional association," Enter new principal office address, if apprincipal office address MUST BE A STREE Enter new mailing address, if applicable	olicable: ET ADDRESS)	N/A N/A N/A	
Enter new principal office address, if apprincipal office address, if apprincipal office address, if apprincipal office address MUST BE A STREE Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI	CE BOX	N/A N/A N/A N/A	
Enter new principal office address, if apprincipal office address, if apprincipal office address, if apprincipal office address MUST BE A STREE Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI	elicable: ET ADDRESS) ELICE BOX) registered office address in Flor	N/A N/A N/A N/A	
Enter new principal office address, if application, " Enter new principal office address, if application of the mean mailing address, if applicable (Mailing address MAY BE A POST OFFI of the mean registered agent and/or the new registered agent and/or th	colicable: CT ADDRESS) CE BOX registered office address in Floristered office address:	N/A N/A N/A N/A	
Enter new principal office address, if apprincipal office address, if apprincipal office address of a street incipal office address of address of applicable of the street incipal office incipal offi	registered office address in Floristered office address:	N/A N/A N/A N/A	
Enter new principal office address, if apprincipal office address, if apprincipal office address MUST BE A STREE Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI) If amending the registered agent and/or the new registered ag	registered office address in Floristered office address: N/A	N/A N/A N/A N/A	
Enter new principal office address, if application, " Enter new principal office address, if application of the mean mailing address, if applicable (Mailing address MAY BE A POST OFFI of the mean registered agent and/or the new registered agent and/or th	registered office address in Floristered office address:	N/A N/A N/A N/A	A

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: X Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>\$Y</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
I) Change	Р	NEER PERSAUD	1225 NEMETH ST	
Add			AUBURNDALE, FL 33823	
X_Remove				
2) Change	Р	KIMBERLY LABONTE	1225 NEMETH ST	
X Add			AUBURNDALE, FL 33823	
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
0				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
		_
-		
an amendment provides for an exchorovisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis of itself:	
		_

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days afte	er amendment file date)
Note: If the date inserted in this block does not meet the applicable statu document's effective date on the Department of State's records.	story filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through votin must be separately provided for each voting group entitled to vote separately	g groups. The following statement rately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficier	nt for approval
by	<u></u>
(voting group)	•
☐ The amendment(s) was/were adopted by the board of directors without shaction was not required.	nareholder action and shareholder
The amendment(s) was/were adopted by the incorporators without sharehaction was not required.	nolder action and shareholder
$Dated_2/28/2018$	
Dated	
(By a director, president or other officer - if directed, by an incorporator - if in the hands of appointed fiduciary by that fiduciary)	ectors or officers have not been a receiver, trustee, or other court
Daxzenos	erson signing)
(Typed or printed name of po	erson signing)
Vice Presid	
(Title of person s	signing)