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COVER LETTER

INC

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: High Caliber Civilian & OFFICER TRAINING ACADEMY
DOCUMENT NUMBER: <u>P2000041156</u>
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
KAYLL A. SPELLMAN Name of Contact Person
High CAliber Civilian + OFFICER TRAINING ACADEMY, INC.
1202 SW 17th ST, 201-136
OCALA FL 3447 City/ State and Zip Code
High CALIBER FLORICA @ amail (om E-mail address: (to be used for future annual report dotification)
For further information concerning this matter, please call:
Name of Contact Person at (352) 804-712 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment

Articles of Incorporation of

HIGH CALIBER CIVILIAN & OFFICER TRAINING ACADEMY, INC.

(Name of Corporation as currently filed with the Flor	ida Dept. of State)	
P2000004115	56	
(Document Number of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1006 , Florida Statutes, this co Incorporation:	rporation adopts the following amendment(s) to its Articles of
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "con "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	npany," or "incorporated" or the abbreviation	n "Corp.,"
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		2021 HAR 10
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address: Name of New Registered Agent	s in Florida, enter the name of the	PH 2: 45
Same of New Registered rigem	.	
(Florida stree	21 address)	
New Registered Office Address:	, 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 Signature of New Registered Age		

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 monner. 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>	n Doc	
X Remove	<u>V</u> <u>Mik</u>	ke Jones	
<u>X</u> Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
I) Change	VP	CARELOCK, ELgin	6510 SWSIST TEARACE
Add Remove			OCALA, FL 34474
2) Change	I	SPELLMAN, MARCARET	1202 SW 17th ST #201-130
Add			OCALA FL 34471
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

The date of each amendment(s) adoption date this document was signed.	on:	, if other than the
Effective date <u>if applicable</u> :	(no more than 9t) days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficients.	by the shareholders. The number of votes cast for the amendment(s) ent for approval.	
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	
	ne amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	by the board of directors without shareholder action and shareholder by the incorporators without shareholder action and shareholder	
•	-2021	
(By a director selected, by a	r, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other couriduciary by that fiduciary)	
	(Typed or printed name of person signing)	
(Title	PRESIDENT DWNER c of person signing)	