## P23000068065

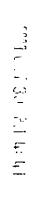
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION:	Y ORLANDO CORP			
DOCUMENT NUM	P23000068065 BER:				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	atter to the following:			
	MARCO AURELIO SALLE:	S PINHEIRO			
		Name of Contact Perso	n		
	6560 CALAMONDIN DRIV	Firm/ Company E			
	WINTER GARDEN, FL 347	Address		,	
		City/ State and Zip Cod	e		
	DSPARKBUSINESS@GMA	IL.COM			
	E-mail address: (to be us	sed for future annual report	notification)		· •
For further informatio	on concerning this matter, pleas	se call:			
MARCO AURELIO S	SALLES PINHEIRO	407 at (	669-2090 )		ني
Name	of Contact Person		de & Daytime Telephone Number		==
Enclosed is a check fo	or the following amount made	payable to the Florida Dep	artment of State:		1
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	ि <del>६-</del> चा	=
Ame Div	iling Address endment Section ision of Corporations . Box 6327	Ameno Divisio	Address Iment Section on of Corporations entre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

## Articles of Amendment to Articles of Incorporation of

GALO ACADEMY ORLANDO CORP

( <u>Name of Corpora</u> 23000068065	tion as currently fi	ed with the Florid	a Dept. of State)	ı	
(Docu	ment Number of Co	rporation (if know	n)	<del></del>	
Pursuant to the provisions of section 607.1006, Floridate Articles of Incorporation:	da Statutes, this <i>Flo</i>	rida Profit Corpora	ntion adopts the fo	ollowing ame	ndment
a. If amending name, enter the new name of the	corporation:				
ame must be distinguishable and contain the word " Inc.," or Co.," or the designation "Corp," "Inc chartered," "professional association," or the abb	." or "Co". A pr	pany," or "incorpo ofessional corpora	rated" or the abb ation name must	The reviation "Co contain the	rp "
. Enter new principal office address, if applicab	<b>p</b> •				
Principal office address MUST BE A STREET AD					
. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	<u>0X</u> )	· 1			<u> </u>
. If amending the registered agent and/or registence agent and/or the new registered	ered office address office address:	in Florida, enter t	he name of the		
Name of New Registered Agent				•	<del>-</del> ,
			-1-1	<del></del>	<u>ن</u>
	(Florida street a	ddress)		·	
New Registered Office Address:			, Florida	<u>;</u>	— <u>∓</u> .
	(Ciņ	9		(Zīp Cod <b>e</b> ). ;⊓	
lew Registered Agent's Signature, if changing Re hereby accept the appointment as registered agent.	gistered Agent: I am familiar with	and accept the obli	gations of the pos	ition.	
		ered Agent, if chan			

Check if applicable  $\Box$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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>sv</u>	Sally Smith	
Type of Action (Check One)  1) Change X Add	<u>Title</u> S	Name  ANA CAROLINA ANDRADE DE GUIMARAES	Address 6560 CALAMONDIN DRIVE WINTER GARDEN, FL 34787
Remove 2) Change Add Remove 3 ) Change			
Add Remove			
4) Change Add Remove			<u> </u>
5) Change Add Remove	<u> </u>	_	
6) Change Add Remove	<del></del>		

Attach additional sheets, if necessary). (Be specific)	
D: ANA CAROLINA ANDRADE DE GUIMARAES - SECRETARY-	
	1 3 2
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	ي ت
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	:
<del></del>	

The date of each amendment(s) ado late this document was signed.	ption:	, if other than the
Effective date <u>if applicable</u> :		
паружане.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo locument's effective date on the Department.	ck does not meet the applicable statutory filing requirements, this date artment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
The amendment(s) was/were appromust be separately provided for ea	eved by the shareholders through voting groups. The following statement ich voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
10/27/2023		
Signature <u>Monh</u> (By a dire selected, l appointed	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)  ARCO AURELIO SALLES PINHEIRO	.) [(
PF	(Typed or printed name of person signing) RESIDENT	30 1
	(Title of person signing)	