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July 25, 2024

NIECAT BLESSINGS ACADEMY MIRIAM C. SULLIVAN 14421 NW 13TH ROAD MIAMI, FL 33167

SUBJECT: NIECAT BLESSINGS ACADEMY INCORPORATED

Ref. Number: P23000085504

We have received your document for NIECAT BLESSINGS ACADEMY INCORPORATED and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Their are missing pages of the amendment, you will only fill our the sections of which are being amended, however the entire packet of forms mustbe submitted for completeness

We are enclosing the proper form(s) with instructions for your convenience.

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Stacy Prather Regulatory Specialist III

AUG 1 4 262

Letter Number: 724A00016466

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: NieCat Blessings A	Academy	
DOCUMENT NUME			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	itter to the following:	
	Miriam C. Sullivan		
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	1
	NieCat Blessings Academy		
		Firm/ Company	
	16800 NW 17th Avenue		
		Address	
	Miami Gardens, Florida 3305	56	
	·	City/ State and Zip Cod	e
	-i		
	niecatfoundation@niecatnfe.	org sed for future annual report	
	n-maii address: (10 be us	sed for future annual report	nouncation)
For further information	n concerning this matter, plea	se call:	
Miriam C. Sullivan		305 at (761 - 5135 de & Daytime Telephone Number
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
☐ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Đivi P.O.	hing Address indment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to

	corporation				
of		1.17.17.17.17.18.18.18.18.18.18.18.18.18.18.18.18.18.			
NieCat Blessings Academy	1 694 1 141 41 F31 13 F5 4	1			
(Name of Corporation as current	ly filed with the Florida Dept.				
P23000085504					
(Document Number of	of Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation add	opts the following amendment			
A. If amending name, enter the new name of the corporation:					
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation na				
B. Enter new principal office address, if applicable:	16800 NW 17th Avenue				
(Principal office address MUST BE A STREET ADDRESS)	Miami Gardens, Florida 33056				
C. Enter new mailing address, if applicable:					
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)					
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address		e of the			
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office add		e of the			
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(Mailing address MAY BE A POST OFFICE BOX) 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		e of the			

Check if applicable

☐ 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 Adá.

X Change	<u>PT</u>	John Doe				
X Remove	V	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s			
1) Change	P	MIRIAM C ARTHUR-SULLIVAN	14421 NW 13TH ROAD			
Add			MIAMI.FLORIDA33167			
X Remove 2) Change	P	MIRIAM C SULLIVAN	14421 NW 13TH ROAD			
X Add			MIAMI, FLORIDA 33167			
Remove Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

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	loption:, if other t	han th
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 20 days ages amenament factuate)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed partment of State's records.	i as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
July 1, 2024 Dated		
Signature	I. Sull	
	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ed fiduciary by that fiduciary)	
	Miriam C. Sullivan	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing) Owner/President	
	(Typed or printed name of person signing) Owner/President (Title of person signing)	

2024 July 14 Fil 2: 14