PAYDOOSITAL

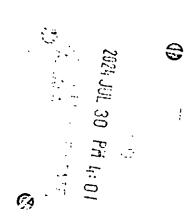
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: UNDER MY WING	GS PREPARATORY INC	-		
DOCUMENT NUM					
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Angeline Timms				
	<u> </u>	Name of Contact Person	1		
	Firm/ Company				
	522 S HUNT CLUB BLVD #	/235			
	Address				
	APOPKA, FL 32703				
		City/ State and Zip Code	?		
	Info@umwacademy.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
Angelina Timms		at (_321	230-7831 de & Daytime Telephone Number		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or 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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
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 to Articles of Incorporation of

UNDER M'	Y WINGS	PREPARA	TORY INC
----------	---------	---------	----------

(Name	of Corporation as curren	tly filed with the Flori	da Dept. of State)
P24000031726			
	(Document Number	of Corporation (if know	vn)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corpo	ration adopts the following amendmen
A. If amending name, enter the new n	ame of the corporation:		
UNDER MY WINGZ PREPARATORY	ACADEMY INC		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp, " "Inc," or "Co".	A professional corpor	orated" or the abbreviation "Corp.,"
B. <u>Enter new principal office address,</u> (Principal office address <u>MUST BE A S</u>		N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	2024 JB
		<u>-</u>	
			P :
). If amending the registered agent at new registered agent and/or the ne			the name of the
Name of New Registered Agent			Ø · ' -
			
	(Florida s	treet address)	
New Registered Office Address:	N/A		Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Ager	nt:	
hereby accept the appointment as regist			ligations of the position.
	Signature of New	Registered Agent, if ch	ringing

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 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) N/A Change		N/A	N/A
Add			
Remove			
2) N/A Change		N/A	N/A
Add			
Remove 3) N/A Change		N/A	N/A
Add			
Remove			
4) N/A Change		N/A	N/A
Add			
Remove			
5) N/A Change		N/A	N/A
Add			
Remove			
6) N/A Change		N/A	N/A
Add			
Remove			

 II amending or adding (Attach additional shee 	g additional Articles, ento ts, if necessary). (Be spe	er change(s) here: ecific)		
N/A				
	- 			
			·	
		<u> </u>		
			·	
	 -			
		•		
, -, -				
 If an amendment pro- provisions for imple 	vides for an exchange, re menting the amendment	classification, or ca	ncellation of issued sl he amendment itself:	<u>1ares,</u>
(if not applicable	, indicate N/A)			•
N/A		 		
				
				

. · N/A	
The date of each amendment(s) adoption:	if other than the
date this document was signed.	
N/A Effective date if applicable:	
(no more than 90 days after amendmen	(file date)
Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without action was not required.	out shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast to by the shareholders was/were sufficient for approval.	for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the continuous separately.	
"The number of votes cast for the amendment(s) was/were sufficient for approv	al
by N/A PRESIDENT HOLDS 100	
(voting group)	_
Signature (By a director, president or other officer – if directors or officer selected, by an incorporator – if in the hands of a receiver, to appointed fiduciary by that fiduciary)	
ANGELINA TIMMS	
(Typed or printed name of person signing)
President	
(Title of person signing)	