1944000005410

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	•
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer: Spake with L. Stahner temon Spake with L. Stahner temon on 10/170 to correct 0/0 on 10/170 to correct 0/0 the S.	<i>§</i> 6

Office Use Only



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My name is Lynn Schwortgnun owner of
Royal Academy Preschool Irc.
My husband died Dec 14th 2015, so I am
applying to change status. (Please Sind included death cert.)

I am the solo owner with 100 % shares.
(see attended change of shares).
Please call this number, with any questions.

407-342-4508.

ECOVER LETTER

Division of Corporations
NAME OF CORPORATION: ROYAL ACADEMY PRESCHOOL INCOMENT NUMBER: P9400065410.
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person ROYAL ACADEMY PRESCHOOL Firm/ Company 295 OXFORD R.D. Address FERN PARK FL. 32730 City/ State and Zip Code Rapso 260 D yahao. Com E-mail address. (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)

TO: Amendment Section

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

10 Articles of Incorporation

ROYAL ACADEMY PRES	CHOOL, Inc.	State)
P9/40006541		,
(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts	the following amendment(s) to
A. If amending name, enter the new name of the corporation:		The new
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 name	e abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	N/A	\sim
(Principal office address MUST BE A STREET ADDRESS)		29
		
C. Enter new mailing address, if applicable:	N 1 1 A	
(Mailing address MAY BE A POST OFFICE BOX)	<u> 1V / /t</u>	MH0: 48
	ı	<u>:</u>
		<u>ප</u>
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		the
Nama of Naw Pagistorad Agant		
Name of New Registered Agent	***	
(Florida st	reet address)	
New Registered Office Address:	, Flo	rida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar		he position.
Signature of New F	Registered Agent, if changing	
Charle if applicable		

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)

Example:

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.

X Change	PT John D	<u> </u>	
X Remove	<u>V</u> <u>Mike J</u>	lones	
X Add	<u>SV</u> <u>Sally S</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P/Mr	JOHN SCHWARIZMA	
Add	1		see attatived death
_X Remove	A		certificate
2) X Change	<u> P</u>	LYNN SCHWARTZMAN	<u> </u>
Add		LYNN SCHWARTZMAN	JPRES IDENT
Remove 3) Change	P	SARAH MCCANN	
X₁ Add			
_ Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. Afamending or adding additional Articles, enter change(s) here	;
(Attach additional sheets, if necessary). (Be specific)	
ALLA	
N/A	
1	
	
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	<u> </u>
F. If an amendment provides for an exchange, reclassification, or	cancellation of issued shares.
provisions for implementing the amendment if not contained	n the amendment itself:
(if not applicable, indicate NA)	

The date of each amendment(s) add this document was signed.	loption:	, if other than the
Ç		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sharehol	der action and shareholder
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amer officient for approval.	idment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated	try 14 2020	
selecte	irector, president or other officer – if directors or officers have not by an incorporator – if in the hands of a receiver, trustee, or ot	
appoin	ted fiduciary by that fiduciary)	1 / 3
	LYNN GCHWARTZMA	<u> </u>
, 1	(Typed or printed name of person signing)	
U	CE- YKEGIUENI	
	(Title of person signing)	