147000085418

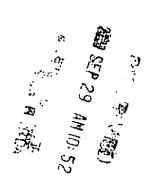
(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	· · · · ·

Office Use Only



100352816161₂₃ Etc. 29

100352816161 09/29/20--01017--003 ***43.75



O SIMMONS

SEP 3 0 2020

COVER LETTER

TO: Amendment Section Division of Corporations

•

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPO	RATION: NEWELIA CORP	PORATION		
DOCUMENT NUM	BER: P97000085418			
	s of Amendment and fee are su	ubmitted for filing.		
Please return all corre	espondence concerning this ma	atter to the following:		
	Frances Casey Lowe			
		Name of Contact Person	П	
	Frances Casey Lowe, P.A.			
		Firm/ Company		
	68-A Feli Way			
	Address			
	Crawfordville, FL 32327			
	City/ State and Zip Code			
	francie@francielowe.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, plea	se call:		
Frances C. Lowe		at (<u>850</u>	926-8245	
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check fi	or the following amount made	payable to the Florida Depa	artment of State:	
S35 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)	
Ma	iling Address	Street	Address	
Amendment Section Division of Corporations		Amendment Section Division of Corporations		

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

Articles of Amendment to Articles of Incorporation

es of Incorporations
of

NEWELIA Corporation

2231 SEP 29 Ail 9: 07

(Name	of Corporation as currently	filed with the Florida	Dept. of State)
P97000085418			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, this F	lorida Profit Corporati	on adopts the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:		
Success for Students, Inc.			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "("chartered," "professional association,	Corp," "Inc," or "Co". A	mpany," or "incorpora professional corporati	ted" or the abbreviation "Corp."
B. Enter new principal office address, (Principal office address MUST BE A S		000000	 -
C. Enter new mailing address, if appl (Mailing address MAY BE A POST) D. If amending the registered agent and new registered agent and/or the new registered	OFFICE BOX) nd/or registered office addre	ss in Florida, enter the	e name of the
Name of New Registered Agent	Frances C. Lowe		
Hume of New Negisiered Agem	68-A Feli Way		
	(Florida stree	t address)	
New Registered Office Address:	Crawfordville		Florida 32327
	(C	lity)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent: tered agent. I am familiar with	/	ttions of the position.
		istered Agent, if changi	ing

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: XChange	<u>PT</u>	John Doe	, , , , , , , , , , , , , , , , , , ,
X Remove	<u>v</u>	Mike Jones	29
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	·
	2020 6 21 2
	
	
If an amendment provides for an exchange, reclassific	cation, or cancellation of issued shares,
	ontained in the amendment itself:
provisions for implementing the amendment if not co	
provisions for implementing the amendment if not co (if not applicable, indicate N/A)	
provisions for implementing the amendment if not co	
(if not applicable, indicate N/A)	

• • •

The date of each amendment(s) ad-	option:	if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	ii 9: 07
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirement	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adort action was not required.	oted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the ame ficient for approval.	endment(s)
	oved by the shareholders through voting groups. The following ach voting group entitled to vote separately on the amendment	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	<u></u>	
	(voting group)	
Dated 9	rnas Chawe	
Signature	rnas Chowl	
	ector, president or other officer – if directors or officers have r by an incorporator – if in the hands of a receiver, trustee, or o	
	d fiduciary by that fiduciary)	ther court
_	Frances C. Lowe (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
_	Attorney Registered (Title of person signing)	Agent
	(Title of person signing)	<u> </u>