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(((H22000187182 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : US CONTADOR INC Account Number : I20200000121 Phone : (770)928-2700 Fax Number : (888)772-8108

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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rion.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

360 EDUCATIVA LLC					
(Name of the Limit	ed Liability Compa (A Florida Limited)	iny as it now appears on our recor- liability Company)	<u>ds.</u>)		
The Articles of Organization for this Limited I.		were filed on	and a	assigned	
Horida document number 1.16000063596	,				
his amendment is submitted to amend the following	owing:				
A. If amending name, <u>enter the new name o</u>	f the limited fial	pility company here:			
he new name must be distinguishable and contain the v	vords "Limited Liabi	dity Company," the designation "CL	C" or the abbreviation	7, E.C.	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		4855 W HILLSBORO BLVD) B3		
		COCONUT CREEK, FL 33073			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	4855 W HILLSBORO BLVE COCONUT CREEK, FL 330) 133	,,,,	
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office ss here: CONTADOR		r the name of the	new regis 2022 MAY	tere
Name of New Registered Agent:				\sim	<u> </u>
New Registered Office Address:	4855 W HILLSBORO BLVD B3 Enter Florida struct address		*	5	_ <u>_</u> 5
	COCONUTIC		lorida <u>23073 —</u> ,	AH 8	
		Cay	Zip Co	.le	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I jurther agree to comply with the provisions of all statistics relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person-being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	SUAREZ VELASCO, MARYSABEL	4855 W HILLSBORO BLVD B3	
		COCONUT CREEK, FL 33073	□Remove
			■ Change
AMBR	ODORISEDE LIBERO, ERNESTO	4855 W HILLSBORO BLVD B3	□Add
		COCONUT CREEK, FL 33073	Remove
			Change
			□ Add
			Remove
			☐ Change
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			Remove
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			□Add
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			☐ Change
			□ Add
			Remove
			Change

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From; Mike Natariou

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Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this	nusi be specific and block does not a	d cannot be prior to meet the applica	o date of filing or ble statutory fil	more than 90 days ng requirements	rafter fring.) Pursuant s. this date will not b	to 605.0207 (he listed as t
document's effective date on the	Department of S	State's records				
he record specifies a delayed effec	tive date, but no	t an effective to	nc, at 12:01 a n	on the earlier of	of (h). The 90th da	y after the
ord is filed						
MAY 23RD		2022				
Dated MAY 23RD						
		~ m				
	-1/WQ7					
	Signature	member or author	rized representat	ve of a member		