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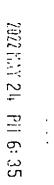
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COVER LETTER

Registration Section

Tallahassee, FL 32314

Division of Corporations	•
SUBJECT: Stepping Stones Name of Limited 1	Academy IRC LLC Liability Company
rena. Fizi	
The enclosed Articles of Amendment and fee(s) are submitted	ed for filing.
Please return all correspondence concerning this matter to the	e following:
Misty Perez	EStevez Name of Person
Stepping Sto	nes Academy IRC (LC Firm/Company
755 9th Pla	Cl
	Address
Vero Beach	Floride 32960
Devezum 200 E-mail address: (to be	ty/State and Zip Code and Zip Code
For further information concerning this matter, please call:	
Misty Perez Esterkz	at (772) 473-2396
in Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
S25.00 Filing Fee S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassas
1.0. DOX 0321	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Stepping Stanes Acane (Name of the Limited Liability Compar	my TRC LLC 2022 1 24 PH 6: ny as K now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number 17000 69171.	2/27/-17
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	
Enter new principal offices address, if applicable:	16416 132 nd Terr. North Juniter FL 334788
(Principal office address MUST BE A STREET ADDRESS)	Jupiter FL 334788
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	16416 132nd Terrace North Jupiter FL 33478
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: N	Perez Estevez 132 ne Terrace North
Jupite	Enter Florida street address FL , Florida 33478 City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p	· · · · · · · · · · · · · · · · · · ·

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

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>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			DChange
			🗆 Add
			□Remove
			Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□ Change

Note	tive date, if other than the date of filing: 19, 2022 (optional) ffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
the reco	ard specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Dated	5/18/2022
	MINATE -
	Signature of a member or authorized representative of a member
	Misty Brez Estevee
	Typed or printed name of signee