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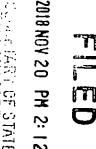
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COVER LETTER

Division of Corp	porations			
Holley Train	ning Associates LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of a	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspor	ndence concerning this matter	to the following:		
	Yolanda Lamer			
		Name of Person	<u>-</u>	
	Holley Training Associates	s LLC		
	-	Firm/Company		
	551 First Cape Coral Dr.			
		Address		
	Winter Garden FL 34787			
		City/State and Zip Code	 -	
	yolanda.training@hotmail.c			
	E-mail address: (to be used for future annual report notifi	cation)	
For further information ec	oncerning this matter, please ca	all:		
Yolanda Larner		313 4438797		
Name of	Person	Area Code Daytime		
Enclosed is a check for th	e following amount:			
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2018 NOV 20 PM 2: 12

SELFITARY OF STATE TALLAHASSEE, FI Holley Training Associates LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on April 19, 2018 ____ and assigned Florida document number _____L18000098619 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Yolanda Larner Name of New Registered Agent: 551 First Cape Coral Dr. New Registered Office Address: Enter Florida street address _, Florida 34787 Zip Code Winter Garden

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 further agree to comply with the provisions of all statutes 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

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>	<u>Address</u>	Type of Action
AMBR	Yolanda Larner	551 First Cape Coral Dr. Winter Garden Fl. 34787	
			☐ Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			Add
		AT	□ Remove
			☐ Change
			Add
			☐ Remove
		 	☐ Change
			Remove
			Change
			□ Remove

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			but not a	n effectiv	e time, at 1	.2:01 a.m. o	n the earlier of
ember 11		. 201	18				
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	date is listed, the disc date inserted in effective date on specifies a de	date is listed, the date must be specedate inserted in this block doe effective date on the Department specifies a delayed effect hay after the record is	edate inserted in this block does not meet the effective date on the Department of State's specifies a delayed effective date, hiday after the record is filed.	date is listed, the date must be specific and cannot be prior to a date inserted in this block does not meet the applicable effective date on the Department of State's records. specifies a delayed effective date, but not a h day after the record is filed.	date is listed, the date must be specific and cannot be prior to date of filing of date inserted in this block does not meet the applicable statutory fileffective date on the Department of State's records. Specifies a delayed effective date, but not an effective high day after the record is filed.	date is listed, the date must be specific and cannot be prior to date of filing or more than 90 c date inserted in this block does not meet the applicable statutory filing requirement of State's records. Specifies a delayed effective date, but not an effective time, at 1 h day after the record is filed.	date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) It date inserted in this block does not meet the applicable statutory filing requirements, this date we effective date on the Department of State's records. Specifies a delayed effective date, but not an effective time, at 12:01 a.m. of h day after the record is filed.

Page 3 of 3

Filing Fee: \$25.00