18000/36/32

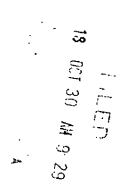
(Re	questor's Name)	
——————————————————————————————————————	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

Divi	ision of Cor	porations		
SUBJECT:	_	Interview Prep. LL.C		
00131011		Name of Lim	ited Liability Company	
The enclosed	Anicles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		James Megna		
			Name of Person	
		Firefighter Interview Prep,		
			Firm/Company	
		4216 N. Ocean Drive		
			Address	
		Hollywood, FL 33019		
		jamegna@comcast.net	City/State and Zip Code	
		E-mail address: (to be used for future annual report notifi	cation)
For further in	formation c	oncerning this matter, please ca	all:	
James Megn	á		954 803-4046	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
□ \$25.00 Fi	iling 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

Firefighter Interview Prep, LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Compan Florida document number	y were filed on	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
Firefighter Training, LLC		
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
		₩
Enter new mailing address, if applicable:		30
• • • • • • • • • • • • • • • • • • • •		
Mailing address MAY BE A POST OFFICE BOX)		
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If amending the registered agent and/or registered or registered agent and/or the new registered office address he		enter the name of the
egistered agent and/or the new registered ornce address ne	<u>re</u> :	
Name of New Registered Agent:		<u>.</u>
New Registered Office Address:		
	Enter Florida street address	
	, Florio	da
	City	Zip Code

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>	Address	Type of Action
			□ Remove
			Change
			□ Remove
			Add"
			Remove
			Change
			
			Remove
			Change
		Add	
			Remove
			Change

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fective date, if other than the on effective date is listed, the date in ote: If the date inserted in this ocument's effective date on the	oust be specific and cannot be prior to date of filing or mor block does not meet the applicable statutory filing	(optional) re than 90 days after filing.) Pursuant to 605,020 requirements, this date will not be listed a
record specifies a delay The 90th day after the re	ed effective date, but not an effective tirecord is filed.	me, at 12:01 a.m. on the earlier o
October 24	2018	
	·	
- /1 	Signature of a member or authorized representative o	Ca member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00