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SECRETARY OF STATE

SECRETARY OF STATE
DIVISION OF CORPORATION

JUN 0 3 2015

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COVER LETTER

TO: Registration Section

Division of C	orporations			
Next Gen	eration Academy LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	. of Amendment and fee(s) are sub-	mitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	Heather Johnson	•		
		Name of Person	-	
	Next Generation Academy			
		Firm/Company	- .	
	1410 Ridgewood Ave			
	· · · · · · · · · · · · · · · · · · ·	Address	-	
	Holly Hill Florida 32117			
	 	City/State and Zip Code	-	•
•	nextgeneration@cfl.rr.com			
		to be used for future annual report notification)		
For further information	concerning this matter, please ca	all:		
Heather Johnson		386 671-0980		
Name	of Person	Area Code Daytime Telephone Number	т `	
		•		
Enclosed is a check for	the following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ate of Status & Copy Theory is enclosed	≤σi
Regi Divis P.O.	stration Section sion of Corporations Box 6327 shassee, FL 32314	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	2 AM 9: 16 AY OF STATE SEE, FLORIDA	44

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Next generation LLC PEH	Generation Academy LLC	۱ <u></u>	
(<u>Name of the Limite</u> (.	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)		
The Articles of Organization for this Limited Lia	ibility Company were filed on 09/13/2005	and ass	signed
Florida document number L05000090002	· · · · · · · · · · · · · · · · · · ·		
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liability company here:		
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC" or the abb	previation "L.	.L.C."
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	ADDRESS)		
		<i>'</i>	
Enter new mailing address, if applicable:	<u> </u>		
(Mailing address MAY BE A POST OFFICE B	<u></u>		<u> </u>
		් _ග	<u> </u>
	<u> </u>		오윤
B. If amending the registered agent and/o	r registered office address on our records, enter	the name	of The nev
registered agent and/or the new registered offi	ice address here:		35°E
	-	<u>"</u> 9 3	0.6
Name of New Registered Agent:		35. 4.	
New Registered Office Address:		3⊞ 6	; <u>3</u> F
	Enter Florida street address		7N
	, Florida		
	City	Zip Code	

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

Next generation LLC

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
mgr	Heather Johnson	1410 Ridgewood Ave Holly Hill fl	Add
			□ Remove
•		· · · · · · · · · · · · · · · · · · ·	☐ Change
owner	Heather Johnson	· · · · · · · · · · · · · · · · · · ·	Add
			□ Remove
		,	Change
	· · · · · · · · · · · · · · · · · · ·		□ Add
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		·······	Change
			SECRETARY OF S SECRETARY OF S SECHETARY OF S FAILAHASSEE FLO
Heather.	Johnson Gave		STATE PRATION 97816 ORIDA
AUTHORIZAT	ON BY PHOME TO		Remove ^
CORRECT -	·		☐ Change
	Smmason Page	2 of 3	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necess, I was informed by the IRS the Incommended the Articles' of incommended. If this is the ing	at
paper work-for that do not ch anything. Thank you	ian co
	· · · · · · · · · · · · · · · · · · ·
E. Effective date, if other than the date of filing: (option: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after file.	ing.) Pursuant to 605.0207 (3)(b)
 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dedocument's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. (b) The 90th day after the record is filed. 	ate will not be listed as the
Dated 5 35 15 Reather Johnson Typed or pricted name of signee	SECRETARY OF STATE OF STATE SECRETARY OF STATE SECRETARY OF STATE
Page 3 of 3	⊅ Q 10 €

Filing Fee: \$25.00