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COVER LETTER

Division of Co	orporations	
R&C Rock	ck Schools, LLC	
SUBJECT.	Name of Limited Liability Company	-
The enclosed Articles of	of Amendment and fec(s) are submitted for filing.	
Please return all corresp	pondence concerning this matter to the following:	
	Heidi Hewis Rothschild	
	Name of Person	_
	R&C Rock Schools, LLC	
	Firm/Company	
	1796 Ascott Road	
	Address	<u> </u>
	North Palm Beach, FL 33408	
	City/State and Zip Code	····
	hrothschild@schoolofrock.com	_
	E-mail address: (to be used for future annual report notification)	
For further information of	concerning this matter, please call:	
Heidi Rothschild	561 625-9366	
Name o	at () c of Person Area Code Daytime Telephone Numb	per
Enclosed is a check for t	the following amount:	
\$25.00 Filing Fee	(additional copy is enclosed) Certific	Filing Fee, cate of Status & ed Copy lal 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

R & C Rock Schools, LLC

(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L08000007457</u>	y were filed on	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbrev	iation "L.L.C."	
Enter new principal offices address, if applicable:	11650 U. S. Highway One		
(Principal office address MUST BE A STREET ADDRESS)	North Palm Beach, FL 33408		
Enter new mailing address, if applicable:	# 1	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)	¥	35	
	91 ¹⁷	Co 1000	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		name of the new	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Florida	ip 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>	<u>Address</u>	Type of Action
***************************************	Joseph C. Paige	2700 PGA Boulevard, Suite 101	
		Palm Beach Gardens, FL 33410	■ Remove
			Change
MOR	Heidi Hewis Rothschild	1796 Ascott Road	■ Add
		North Palm Beach, FL 33408	□ Remove
			☐ Change
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing of the local state of the date inserted in this block does not meet the applicable statutory filecument's effective date on the Department of State's records.	(0 r more than 90 days a ling requirements,	optional) after filing.) Pursual this date will not	nt to 605.0207 (t be listed as t
	e time, at 12:0	1 a.m. on the	earlier of:
re record specifies a delayed effective date, but not an effective The 90th day after the record is filed.			
The 90th day after the record is filed. Dated Dated			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00