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ZEURCIARY DESIALE

C. LEWIS
NOV 182008
EXAMINER

COVER LETTER

TO: Registration Section of Corporation of Corporation of Corporation of Corporation (Corporation Corporation)			
SUBJECT: LAKE CO	OUNTY ACADEMY	/ ," LLC" ited Liability Company)	
	(Ivame of Lim	nted Liability Company)	
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	Marina Bromfield		
		(Name of Person)	
	Lake County Academy		
		(Firm/Company)	
	922 N Grove St		<u> </u>
		(Address)	
	Eustis FL 32726		
		(City/State and Zip Code)	
For further information cor	ncerning this matter, please c	all:	
Garry Bromfield		at (<u>3352</u>) 357 6214	
(Name of	Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for the	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:

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

2909 NOV 17 PM 1: 32

SEURETANT OF STATE TALLAHASSEE, FLORIDA

LAKE COUNTY ACADEMY LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

he Articles of Organization for this Limited Liability Company were filed on 23TH SEPT 2008 and assigned			
Florida document number L08000090443			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company he	ere:	
The new name must be distinguishable and end with the words "I "L.L.C."	Limited Liability Comp	pany," the designation "LLC	" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS	<u> </u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered registered agent and/or the new registered office address Name of New Registered Agent:		our records, enter the	name of the new
New Registered Office Address:			
	(Enter Florida street address)		
	, Florida		
	(City)	1	(Zip Code)
New Registered Agent's Signature, if changing Registered Age	ent:		

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 608, 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)

it amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member <u>Title</u> Address **Type of Action** <u>Name</u> Garry Bromfield MGR 922 N Grove St |₹ Add Remove **Eustis** FL 32726 Remove Remove Remove Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Bromfield.
Signature of a member or authorized representative of a member

Typed or printed name of signee

Marina Bromfield

Dated 11-14-2008

Page 2 of 2

Filing Fee: \$25.00