09000050967

	(Requestor's Name)
	(Address)
	(Address)
	(Ćity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:





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TALLAHASSEE, FLORIDA

2024 NOV 26 PH 4: 34

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 11/26/2024	-	⇔WALK IN*
ENTITY NAME TMG MI	ES LLC	
LIVITI I NAPIL		
DOCUMENT NUMBER_		
	PLEASE FILE THE ATTACHED AND RETURN	
xxxxxxxx	Plain Copy	
	Certified Copy	
	Certificate of Status	
	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY** Certified Copy of Arts & Amendments Certificate of Good Standing	
	APOSTILLE' / NOTARIAL CERTIFICATION	
COUNTRY OF DESTINAT	TON	.
NUMBER OF CERTIFICAT	TES REQUESTED	
TOTAL OWED \$25.00	ACCOUNT #: I20160000072	<u></u>
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Donne and Time at the	he above number for any issues or concerns. Thank you so	//

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2024 NOV 26 PM 3: 20

TMG MES, LLC

(Name of the Limited Liability Company as it now appears on our records.)—(A Florida Limited Liability Company) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 05/26/2009 and assigned Florida document number _L09000050967 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 "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 325 Seaboard Lane, Suite 150 Enter new mailing address, if applicable: Franklin, TN 37067 (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: Mark Claypool Name of New Registered Agent: 4100 Montessori Drive New Registered Office Address: Enter Florida street address _, Florida 32504 Zip Code Pensacola City 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.

Mark Claypool

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>	Name	<u>Address</u>	Type of Action
AMBR	Galileo Education Intermediate, Inc	325 Seaboard Lane, Ste. 150	■Add
		Franklin, TN 37067	□Remove
			□Change
MGR	Kathy Turtle	2100 Magnolia Avenue	
		Pensacola, FL 32503	■Remove
MGR	Mary Gaudet	9613 Grallatorial Circle	🗀 Add
		Pensacola, FL 32507	Remove
			Change
MGR	Maria Mitkevicius	5820 Keystone Road	□Add
		Pensacola, FL 32504	■Remove
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Filing Fee: \$25.00