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Office Use Only



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COVER LETTER

Division of Corp				
SUBJECT: FUT W	e Genius A	cademy LLC.		
	Name of Limite	ed Liability Company		
The enclosed Articles of A	amendment and fee(s) are subr	nitted for filing.		
Please return all correspon	dence concerning this matter t	o the following:		
	Takeisha Sil	\ s		
		Name of Person		
	Future Genius	Academy LCC		
	n wd	•		
	3531 NW 2nd			20
表:BOECTA		Address		5035 J
	Fost Landerd	City/State and Zip Code		JAN 25 JAN 25 JAN 25 ANASS
A Copyright of Copyright		City/State and Zip Code		
•	Sillstakeisha @	by used for future annual report notification	on)	PA S
				PM 12: 36 OF ST TE
For nurther information co	ncerning this matter, please ca	III;		
Takeisha 5	1115	at (754) 214-4708		
Name of	Person	Area Code & Daytime Tel	lephone Number	r
Enclosed is a check for the	e following amount:			
■ \$25.00 Filing Fee	Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
\				

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

Future Geniu	is Academy LLC	
(Name of the Limited Li (A Fl	ability Company as it now appears on ou orida Limited Liability Company)	r records.
The Articles of Organization for this Limited Liab	ility Company were filed on $\frac{1000}{2}$	and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of th	ne limited liability company here:	
NIA	·	
The new name must be distinguishable and end with the L.L.C."	he words "Limited Liability Company," the	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	le:	
Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE BO</u>	<u></u>	2013 JAN 25 CLAR SSEE
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our recee address here:	LS 22
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Flo	rida street address
		_, Florida
	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 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 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>	<u>Name</u>	Address	Type of Action
MGR	LISA Thomas	2971 NW 8th Court	Add
		Fort Lauderdale Fl 333	Remove
MGRM	Latina Black	504 Northwest 21st Ave Fort Lauderdale FL 33311	AddRemove
MGRM	Takeisha Sills	3531 NW 2nd Street Fort Lauderdale FL 33:	Add Remove
		LANASSEE FLICTION	2013 JAN 25 PH 12: 3: Add
			Remove
**************************************			Add
			Remove

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary,
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	Lakeish Ils
	Signature of a member or authorized representative of a member
	Takeisha VIIIS / Owner
	Typed or printed name of signee
	Page 3 of 3

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