

LI 000038591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

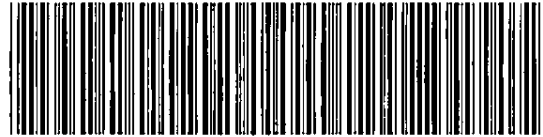
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE COACHING, TRAINING & AUTOMATION PARTNERS, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARIENILDA PIERLUISSI

Name of Person

MPE CONSULTING, CORP

Firm/Company

2700 GLADES CIRCLE STE 159

Address

WESTON, FL 33327

City/State and Zip Code

maryp@mpeconsulting.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARIENILDA PIERLUISSI

754 216-4105
at ()

Name of Person

Area Code

Daytime Telephone Number

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

THE COACHING, TRAINING & AUTOMATION PARTNERS, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 03/30/2011 and assigned
Florida document number L11000038591.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Pivot2Success LLC

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)

Enter new mailing address, if applicable:

(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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida 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 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

[illegible]

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(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 filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated FEBRUARY 07 2025

Signature of a member or authorized representative of a member

ALEJANDRO PENALOZA

Typed or printed name of signee