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(Re	equestor's Name)	
(Ac	idress)	
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(Ĉi	ty/State/Zip/Phone	e #)
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	MAIL	
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	<u> </u>
Certified Copies	Certificates	s of Status
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SECRETARY OF STATE DIVISION OF CORPORATIONS

N COOPER JUL 17 2018

COVER LETTER

TO:

TO:	Registration Division of C			
ertis i		h Of Excellence LLC		
SUBJ	ECT:	Name of Limi	ted Liability Company	
		•		
The e	nclosed Articles	of Amendment and fee(s) are sub-	nitted for filing.	
Pleas	e return all corres	pondence concerning this matter	to the following:	
		Socrate Exantus		
			Name of Person	
		In Search Of Excellence	LLC	
		· · · · · · · ·	Firm/Company	
		9900 Stirling Road Suite	302	
			Address	
		Cooper City, FL 33024		
		Socrate Exantus E-mail address: (City/State and Zip Code Socrate a All Code to be used for future annual report notifi	ounty PPM. Com
For fi	urther informatio	n concerning this matter, please ca	nil:	
Socr	rate Exantus		407 2 52-3627	
	Nam	e of Person	Area Code Daytime	Telephone Number
Enclo	osed is a check fo	or the following amount:		
■ S	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)
	Reg Div	ILING ADDRESS: istration Section ision of Corporations . Box 6327	STREET/COURI Registration Section Division of Corpora Clifton Building	n

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

In Search Of Excellence LLC		
(Name of the Limited Liability Compa (A Florida Limited I	nny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on June 26, 2012	ind assigned
Florida document number L11000128630		
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 Liabil	lity Company," the designation "LLC" or the abbrevia	tion "L.L.C."
Enter new principal offices address, if applicable:		——————————————————————————————————————
(Principal office address MUST BE A STREET ADDRESS)		16
		JUL
		- STARTE
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		SIA CRASIA
		- 100
		:77
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		name of the new
- Chimered agent and/or the new registered office address her	<u>.</u> .	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida strect address	
	, Florida	·
	City Zi _I	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>	Address	Type of Action
Manager	Socrate Exantus	9900 Stirling Road Suite 302	
		Cooper City, FL 33024	Remove
			☐ Change
Manager	Cassandra Exantus	9900 Stirling Road Suite 302	🗖 Add
		Cooper City, FL 33024	
			■ Change
		94-36	
			Remove
			Change
			Add
			Remove
			Change
			□ Add
			□ Remove
			☐ Change
			Remove
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	e date inserted in s effective date or				ole statutory	filing require	ments, this da	e will not be li	sted a
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	specifies a de			, but not	an effectiv	ve time, at	: 12:01 a.m	. on the ear	lier c
The 90	th day after th	ne record is	filed.						
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ated	/	Jouph	Essa	1			iber		

Page 3 of 3

Filing Fee: \$25.00