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TO:

Registration Section

Tallahassee, FL 32314

Division of Corporations DYNAMIC LEADERSHIP ACADEMY LLC SUBJECT: 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: WILLIAM AUXIER Name of Person DYNAMIC LEADERSHIP ACADEMY LLC Firm/Company 12637 BASSBROOK LANE Address **TAMPA, FL 33626** City/State and Zip Code bill@billauxier.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Bill Auxier Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ■ \$25.00 Filing Fee □ \$30.00 Filing Fcc & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address: **Street Address:** Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DYNAMIC LEADERSHIP ACADEMY LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lir	Company as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Com	pany were filed on 1/10/2014	and assigned
Florida document number L14000005469		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u></u>	
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		F OZO NOV
Enter new mailing address, if applicable:) O T
(Mailing address MAY BE A POST OFFICE BOX)		19
		PH 12:
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, <u>enter th</u>	e name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	da
	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 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
AMBR	BOWERS HARBOR CORP	112637 BASSBROOK LANE	□Add
		TAMPA, FL 33626	■Remove
			Change
AMBR	WILLIAM AUXIER	11838 EASTHAMPTON DR	■Add
		TAMPA, FL 33626	
		.	Remove No HChange
AMBR	ELISE AUXIER	11838 EASTHAMPTON DR	Adul Remove
		TAMPA, FL 33626	Ω α □Remove
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Effective date, if other than the d	be specific and cannot be proceed the app	rior to date of filing o blicable statutory fi	r more than 90 days after	r filing.) Pursu		
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document's effective date on the Dep e record specifies a delayed effective rd is filed.	date, but not an effectiv	e time, at 12:01 a.ı	n. on the earlier of: (b) The 90th	day af	ter the
Note: If the date inserted in this block document's effective date on the Depter record specifies a delayed effective rd is filed. Dated NOVEMBER 16	, 2020	·			day af	ter the

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