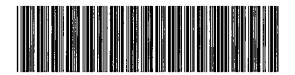
L15000127466

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cir	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
•	·	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		· ·
		ł

Office Use Only



000280216080

12/29/15--01016--016 **25.00

2015 DEC 28 PK 12: 58

K.SALY EXAMINER DEC 30 2015

COVER LETTER

	gistration Servision of Cor			
SUBJECT:	Training Ce	nter of America, LLC		
SCHOLCT		Name of Lim	ited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	n all correspon	ndence concerning this matter	to the following:	
		Pamela McBroom		
			Name of Person	
		Training Center of Americ	a, LLC	
			Firm/Company	
		52 Tuscan Way, Suite 202	-407	
			Address	
		Saint Augustine, FL 32092	2	
			City/State and Zip Code	
		mcbroom@yahoo.com	to be used for future annual report notifi	cation)
For further i	information co	oncerning this matter, please ca	·	cationy
Pamela Mc	Broom		931 265-5868	
	Name of	`Person		Telephone Number
Enclosed is	a check for th	e following amount:		
\$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)

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

2015 DEC 28 PH 12: 58
TALKAHASSEE, FLORIDA

Training Center of America, 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 Co.	ompany were	filed on July	23, 2015	and assigned
Florida document number L15000127466	 •			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limi	ited liability c	ompany her	<u>:</u> :	
The new name must be distinguishable and contain the words "Limit	ited Liability Cor	npany," the des	ignation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDR	(ESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered agent and/or the new registered office address agent and and agent and agent and agent and agent agent and agent a		address on o	our records, <u>ent</u>	er the name of the new
New Registered Office Address:				
		Enter Florid	a street address	
		itv	, Florida	7in Coda
New Registered Agent's Signature, if changing Registered		uy		zip Code
		antiu thin na	manite. I Guuthau	acres to someth with the
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag being filed to merely reflect a change in the registered company has been notified in writing of this change.	omplete perfo gent as provia	rmance of m led for in Ch	y duties, and I at apter 605, F.S. C	m familiar with and Or, if this document is

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	Address	Type of Action
MgrMbr	Kevin B McBroom	225 St Lucie Way	□ Add
		Saint Augustine, FL 32092	■ Remove
			Change
MgrMbr	Pamela S McBroom	225 St Lucie Way	■ Add
		Saint Augustine, FL 32092	☐ Remove
			☐ Change
			Add Remove C 2 Change C Add C S Change C C Change C C C Change C C C Change C C C C C C C C C C C C C C C C C C C
			☐ Change
		,	☐ Remove
			☐ Change
			Add
			□ Remove
			☐ Change

	t			
				,
				
				28 28 28 28 28 28 28 28 28 28 28 28 28 2
				C 25
				PAKE: FLORING
				Sand.
<u></u>				
ective date, if other than the effective date is listed, the date mute: If the date inserted in this burnent's effective date on the I	ist be specific and cannot be lock does not meet the ap	prior to date of filing or a	(option more than 90 days after fi ng requirements, this d	ling.) Pursuant to 605.0207
record specifies a delaye he 90th day after the rec	d effective date, but cord is filed.	not an effective	time, at 12:01 a.r	n. on the earlier of
November 24	2015			
1 har	$\overline{\mathbb{Z}}$	·		
v Nom. Ma	100 mm J		of a member	

Page 3 of 3

Filing Fee: \$25.00