

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
		·

Office Use Only



300281628883

02/03/16--01023--001 **30.00

2016 FEB -3 P 2: 5u

FEB 0 4 2015,). BINDCE

COVER LETTER

Divi	sion of Corpo	rations				
SUBJECT:	FIRST COAS	T YOUNG STARS LEARN	ING ACADEMY LLC			
-		Name of Limi	ted Liability Company			
The enclosed	Articles of An	nendment and fee(s) are subr	mitted for filing.			
Please return	all correspond	ence concerning this matter t	to the following:			
		VERDY BUCKHOLTZ				
Name of Person					-	
FIRST COAST YOUNG STARS LEARNING ACADEMY LLC						
Firm/Company				-		
3911 NORTH MAIN STREET						
			Address		-	
		JACKSONVILLE, FLORI	DA 32206			
			City/State and Zip Code		-	
	•	TDGRANT0723@ATT.NE				
		E-mail address: (t	o be used for future annual report notification)			
For further in	formation cond	cerning this matter, please ca	ill:	医器	2016	
VERDY BU			904 683-2401 at ()	2 (7) 2 (7) 3 (7)		· [
	Name of Po	erson	Area Code Daytime Telepho	one∰umber En -<	τω Γ	124
				्रिते _{(सा} सम्बद्धाः	ם ה	
Enclosed is a	check for the f	following amount:			₩ C	J
□ \$25.00 F	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	Certified	ite of Status	

MAILING ADDRESS:

TO:

Registration Section

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

TO ARTICLES OF ORGANIZATION OF

N/A	
(<u>Name of the Limited Liability</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)
he Articles of Organization for this Limited Liability Co orida document number N/A 45001731	ompany were filed on OCTOBER 12, 2015 and assigned
is amendment is submitted to amend the following:	
. If amending name, <u>enter the new name of the limit</u> /A	ted liability company here:
e new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	N/A
rincipal office address MUST BE A STREET ADDR	ESS) N/A
	N/A
nter new mailing address, if applicable:	N/A
Mailing address MAY BE A POST OFFICE BOX)	N/A
	N/A
If amending the registered agent and/or regist gistered agent and/or the new registered office address Name of New Registered Agent:	ALLA
N/ 4	77 00 France (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
New Registered Office Address:	Enter Florida street address
N/A/	- in T
***************************************	City Zip Code
lew Registered Agent's Signature, if changing Registered	

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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	TAMEKA SMITH	536 W 27TH STREET, JACKSON	
			■ Remove
			Change
	NA. 1		Add
			□ Remove
			☐ Change
			
			□ Remove
			☐ Change
		TACKET AREASSES. FI	O Add
		SSTY OF	T Remove
	***************************************	C	ロChange ジ 「Add
			□ Remove
			☐ Change
			
			☐ Remove
			Change

• .	N/A				
					_
					_
					_
		····			
					
		······································	 		
				·	
					<u>.</u>
					
					-
					_
		,,		*************************************	
		- <u>P</u> E	2016		<u>.</u>
		PAN	FEB	*****	- .
		SSES	<u>.</u>	[mit.ex]	
			U		
	JANUARY 28 2016	ORIG ORIG	2 5		
(If an e	tive date, if other than the date of filing: ffective date is listed, the date must be specific and cannot be prior to date of filing or more than	(option 90 days after fil	ing.) Pu	rsuant to 6/	05.0207 (3)(b)
<u>Note</u> docu	If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	rements, this d	ate will	not be lis	sted as the
If the re (b) Th	cord specifies a delayed effective date, but not an effective time, a egont day after the record is filed.	at 12:01 a.r	n. on	the earl	lier of:
	JANUARY 28, 2016				
Date	,				
	New Bignature of a member or authorized representative of a me	mhár			
	VERDY BUCKHOLTZ	inoci			
	· ·····································				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00