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COVER LETTER

TO:	Registration Se Division of Cor		1 · · · · · · · · · · · · · · · · · · ·	
		RATIONS LLC		
SUBJ	ЕСТ:	Name of Lim	ited Liability Company	
The en	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		Fabrizio Spinelli		
		· · · · · · · · · · · · · · · · · · ·	Name of Person	
			Firm/Company	<u> </u>
		2910 Maguire Road Suite	2006	
			Address	
		Ococe, FL 34761		
		fs@aexplorers.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	ication)
For fu	rther information c	oncerning this matter, please ca	all:	
Fabriz	zio Spinelli		407 922-5337 ·	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclos	sed is a check for th	ne following amount:		
■ \$2	5.00 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**

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2017 NOV 27 PM 3: 3
V / A / A / A / A / A / A / A / A / A /

AEA OPERATIONS LLC	1	SECRETARY 3: 37
(Name of the Limited Liability Compa	ny as it now appears on our	records AHACRY OF CO
AEA OPERATIONS LLC (Name of the Limited Liability Companies (A Florida Limited Liability Companies) Articles of Organization for this Limited Liability Company L16000034994	were filed on	6 and assigned
s amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liabi	ility company here:	
e new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation	on "LLC" or the abbreviation "L.L.C."
ter new principal offices address, if applicable:		
rincipal office address MUST BE A STREET ADDRESS)		
		· · · · · · · · · · · · · · · · · · ·
ter new mailing address, if applicable:		
ailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registered of gistered agent and/or the new registered office address here Name of New Registered Agent:	fice address on our r	records, <u>enter the name of th</u>
New Registered Office Address:	I	
	Enter Florida stree	t address
		. Florida
	City	Zip Code
w Registered Agent's Signature, if changing Registered Agent:	City	, Florida Zip Code
" registered regent a signature, it thanging registered Agent;		

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR ·	AEA EDUCATION GROUP LLC	2910 Maguire Road Suite 2006	Add
		Ocoee, FL 34761	
			Remove
			Change
MGR	Calabria Investments LLC	533 Balmoral Road	■ Add
		Winter Park, FL 32789	
			□ Remove
			Change
MGR	Spinvest LLC	11342 S Camden Commons Dr	⊞ Add
		Windermere, FL 34786	□ Remove
			□ Change
MGR	Bilanx LLC	8168 Via Bella Notte	■ Add
		Orlando, F1. 32836	□ Remove
			C Remove
		Change	
			□ Add
			SEC Determove
			2011 BOV 21 PH 337 SECRETARY OF STATE FALLAHASSEE. FLORIDA
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Effective date, if other than the fan effective date is listed, the date must	date of filing:	of filing or more than 90 days at	tional) fer filing.) Pursuant to 605.0201
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable s	tatutory filing requirements, t	his date will not be listed as
ne record specifies a delayed The 90th day after the reco	effective date, but not an ord is filed.	effective time, at 12:01	a.m. on the earlier o
November 21 Dated	2017		
	Signature of a morniber or authorized		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00