L16000057800

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COVER LETTER

	Registration Section Division of Corporations						
SUBJEC	John Costanza Institute of Technology, LLC						
SOBJEC		Name of Lin	nited Liability Company				
The enclo	osed Articles	of Amendment and fee(s) are sub	omitted for filing.				
Please ret	turn all corres	spondence concerning this matter	to the following:				
		Melissa Lea Radovich					
		JCIT2	Name of Person				
		Firm/Company 6151 Osprey Drive #300					
		Sarasota FL 34240	Address				
		Support@jcit2.com	City/State and Zip Code				
		E-mail address: (to be used for future annual report noti	fication)			
For furthe	er information	n concerning this matter, please co	all:				
Melissa	Lea Radovi	ch	877 455-2482 at ()				
	Nam	e of Person	Area Code Daytim	e Telephone Number			
Enclosed	is a check fo	r the following amount:					
\$25.0	00 Filing Fee	S30.00 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

John Costanza Institute of Tecl				
(<u>Name of the Lim</u>	ited Liability Compa (A Florida Limited l	iny as it now appears on our recor Liability Company)	<u>ds.</u>)	
The Articles of Organization for this Limited I		were filed on 3/22/2016	and assigned	
Florida document number L16000057800	 .			
This amendment is submitted to amend the fol	llowing:			
A. If amending name, <u>enter the new name</u>	of the limited liab	ility company here:		
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLO	C" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		6151 Osprey Drive #300		
(Principal office address MUST BE A STREET ADDRESS)		Sarasota FL 34240		
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>		PO Box 20414		
		Sarasota FL 34276		
B. If amending the registered agent and registered agent and/or the new registered of	office address her	<u>e</u> :	ls, enter the name of the	
Name of New Registered Agent:	Melissa Lea Radovich			
New Registered Office Address:	6151 Osprey I	Drive #300 Enter Florida street addre	7 € 3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
	Sarasota	, F	lorida 34240 ~	
		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 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
MGR	Melissa Lea Radovich	2604 Monterey St. Sarasota FL 34231	∃ Add
			☐ Remove
AMBR	Melissa Lea Radovich	2604 Monterey St. Sarasota FL 34231	Change
			Add
			□ Remove
			Change
		·	
			□ Remove
			— ∰ © — <u>A A</u> D Change
			Add Add
			OF G Remove
			□ Change
			5
			Add
			□ Remove
			Change

John Costanza and Melissa Rado	vich are creating a partne	ership. John Costanza	is 95% Partner and		
Melissa Radovich is 5% Partner.					
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fective date, if other than the dat	06/01/2019		(optional)		
on effective date is listed, the date must be ote: If the date inserted in this block is cument's effective date on the Department.	specific and cannot be prior t does not meet the applica		han 90 days after filing.)		
record specifies a delayed ef The 90th day after the record		an effective time	e, at 12:01 a.m. c	on the earlier	⁻ 0
May 21st	2019				
	Comme	(gottama			
Sig	nature of a member or autho	rized representative of a	member		

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Filing Fee: \$25.00