L160000064031

(Requestor	's Name)
(Address)	
,	
(Address)	
(City/State	/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Document	t Number)
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COVER LETTER

TO:	Registration So Division of Cor			
SUBJE		ONUT CREEK SCHOOLS LL	.C	
.,()1331		Name of Lim	nited Liability Company	
		Amendment and fee(s) are sub		
Please i	eturn all correspo	ondence concerning this matter	to the following:	
		Jose Franco		
			Name of Person	
			Firm/Company	
		6310 N STATE ROAD 7		
			Address	
		COCONUT CREEK, FL	33073	
			City/State and Zip Code	
		billing@nedschools.com E-mail address: (to be used for future annual report nouf	ication)
For furt	her information c	concerning this matter, please c	all:	
Jose Fr	anco		305 809-6799 at ()_	
	Name o	f Person	Area Code Daytime	: Telephone Number
Enclose	d is a check for t	he following amount:		
\$25	.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 fadditional 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

The Coconut Creek Schools LLC				
(Name of the Limited (A	Liability Compa Florida Limited 1	inv as it now appears on our i Liability Company)	records.)	
The Articles of Organization for this Limited Liab Florida document number L16000064031	ility Company	were filed on 03/30/2016	·a	nd assigned
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of th	<u>ie limited liab</u>	ility company here:		
The new name must be distinguishable and contain the word	ls "Limited Liabil	lity Company," the designation	"LLC" or the abbrevia	
Enter new principal offices address, if applicable	le:	6310 N State Road 7		50 五 二
(Principal office address MUST BE A STREET)		Coconut Creek, FI 33073		<u> 9</u>
Enter new mailing address, if applicable:		6310 N State Road 7		매 2:
(Mailing address MAY BE A POST OFFICE BC	<u> </u>	Coconut Creek, FL 3307	3	୍ ଅ
New Registered Office Address:	e address her	e: DUCATIONAL DEVELOI oad 7 Enter Florida street	PMENT LLC	name of the new
	Coconut Creek	City	_, Florida $\frac{33073}{20}$	Code
		C.tth.	Zų	Coae

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

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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			Change
			
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			Charles Charles Add
			Remove Change
			□ Change ∰
			□ Remove
			□ Change
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tive date, if other than tl	he date of filing:			(optional)	
ffective date is listed, the date n If the date inserted in this	nust be specific and cannot	be prior to date of fi	ling or more than 90 da	ys after filing.) Pursuan	
ment's effective date on the			ory ming requiremen	its, this date will not	be fisted a.
ecord specifies a delay e 90th day after the re		out not an effe	ctive time, at 12	::01 a.m. on the	earlier o
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Filing Fee: \$25.00