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TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Fre Flags Dance Academy, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ashley R. Barnett
FIVE Flags Dance Academy
27814 Oakachoy Loop
Daphne, A Labama 36504 City/State and Zip Code Abarnet tolance @ gmail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ashley R. Barnett at (850) 484-0648 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$\frac{1}{2}\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$

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

Five Flags (Name of the Limited Liab (A Flori	Dance Heademy, LLC ility Company as it now appears on our records. ida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number <u>L160001057</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the li	mited liability company here:
Same hane The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	same =====
(Principal office address MUST BE A STREET ADI	DRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	TO PMI2: 58 ASSEE, FLORIDA
B. If amending the registered agent and/or registered agent and/or the new registered office ad	gistered office address on our records, enter the name of the new dress here:
Name of New Registered Agent: New Registered Office Address:	Ashley R. Barnett 27814 D 1903 E. Olive Rd Enter Florida street address Pensaco / a Florida 32514 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>	Name	Address	Type of Action		
AMBR	Christopher Burnett	27864 Oakachoy Los	p_□ Add		
		27864 Oakachey Los Daphner AL 3652	Remove		
			Change		
AMBR	H. DNeil Robinson	1702 Chase DR.	Add		
		Saraland, AL 3657	P		
			Change		
	·····		Add		
			□ Remove		
			Change		
			Remove		
			Change		
			Add		
			Remove		
			Change		
			Add		
			Remove		
			Change		

D. If amending any other information, enter change(s) here: (Attach additional sheets, if no		
		
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E. Effective date, if other than the date of filing:	otional) Her filing.) Pursuant to 60 his date will not be lis	05.0207 (3)(sted as the
f the record specifies a delayed effective date, but not an effective time, at 12:01 b) The 90th day after the record is filed.	L a.m. on the ear	lier of:
Dated May 60 45, 2018. Signature of a member or authorized representative of a member		
Ashley R. Barnett	4+·	

Page 3 of 3

Filing Fee: \$25.00