

116000218664

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

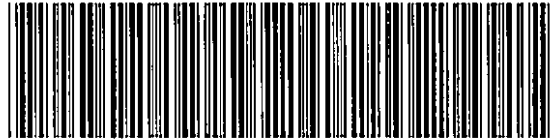
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2018 DEC 27 PM 2:15

CLERK OF STATE
TALLAHASSEE, FL

C. GOLDEN

DEC 28 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHALOM MONTESSORI SCHOOL 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:

ROXANA YANINA MORALES
Name of Person

SHALOM MONTESSORI SCHOOL LLC
Firm/Company

3790 PRAIRIE AVENUE
Address

MIAMI BEACH, FL 33140
City/State and Zip Code

SHALOMMONTESSORISCHOOL@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROXANA YANINA MORALES at (305) 772-5497
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 4, 2018

ROXANA YANINA MORALES
3790 PRAIRIE AVENUE
MIAMI BEACH, FL 33140

SUBJECT: SHALOM MONTESSORI SCHOOL LLC
Ref. Number: L16000218664

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 418A00024871

RECEIVED

2018 DEC 27 AM 11:43

SECRETARY OF STATE
TALLAHASSEE, FL

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

SHALOM MONTESSORI SCHOOL LLC

2018 DEC 27 PM 2:15

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 12-02-16 and assigned
Florida document number 216000218664

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

SHALOM MONTESSORI SCHOOL LLC
PO Box 414740
MIAMI BEACH, FL 33141

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
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.

x 

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>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>ROXANA YANINA MORALES</u>	<u>PO BOX 414740</u>	<input type="checkbox"/> Add
		<u>MIAMI BEACH, FL 33140</u>	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
<u>AMBR</u>	<u>ROXANA YANINA MORALES</u>	<u>PO BOX 414740</u>	<input type="checkbox"/> Add
		<u>MIAMI BEACH, FL 33140</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

PLEASE CHANGE ADDRESS: FOR AUTHORIZED REPRESENTATIVE
PEREYRA, MARIA GENOVEVA TO:
PO BOX ~~7444~~ 414740
MIAMI BEACH, FL 33141

PLEASE CHANGE ROXANA YANINA MORALES
ADDRESS TO:
PO BOX 414740
MIAMI BEACH, FL 33140

E. Effective date, if other than the date of filing: _____ (optional)


(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated NOVEMBER 16 . 2018 .



Signature of a member or authorized representative of a member

ROXANA YANINA MORALES

Typed or printed name of signer