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Division of Corporations

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From:

Account Name : BUCHANAN INGERSOLL & ROONEY PC - TAMPA OFFICE

Account Number : I19990000148 Phone : (813)769-7692

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Fax Audit No. H24000372949 3

TO ARTICLES OF ORGANIZATION **OF**

Accountable Teaching Services, LLC			
(Name of the Limited Liability Compar (A Florida Limited L	ny as it nuw appears on our records hability Company)	1,)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000056758</u> .	were filed on 3/13/2017	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
The new name must be distinguishable and contain the words "Limited Liabili	ity 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)			
		(e)	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter (</u>	the name of the new registered	
Name of New Registered Agent:		[11	
New Registered Office Address:	Enter Florida street address		
	Enter ciorida sirvet adaress		
	, Flo	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:	·	·	
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, an provided for in Chapter 605, 1	nd I am familiar with and F.S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

Docusion Envelope ID: 85795EA4-6D46-4E4E-BEICHAPPARE3DEACT SO II Rooncy 4125621041
If amending Authorized rerson(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

Fax Audit No. H24000372949 3

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Gerardo Aguirre	2326 S. Congress Avenue, 2F	= Add
		West Palm Beach, FL 33406	□Remove
			□Change
MMGR PBAC	PBACO Holding, LLC	2326 S. Congress Avenue, 2F	□Add
		West Palm Beach, FL 33406	\(\exists \text{Remove}\)
			Change
			□Remove
			□Change
			
			□Remove
			Change
			DAdd
		0	□Remove
			Change
			□Add
			□Remove
			☐ Change

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ax Audit N	No. H24000372949 3		
If amen	ding any other info	mation, enter change(s) here: (A	Attach additional sheets, if necessary.)
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(It an effec Note: If	f the date inserted in th	must be specific and cannot be prior to dat	(optional) te of filing or more than 90 days after filing.) Pursuant to 605.0207 statutory filing requirements, this date will not be listed as
ne record ord is filed		ctive date, but not an effective time, a	at 12:01 a.m. on the earlier of: (b) The 90th day after the
No.	ovember 6	2024	
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	- Control of the Cont		
	- dissipation	Signature of a member or authorized	representative of a member
		*	•
	Gerardo Aguirre	•	•

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