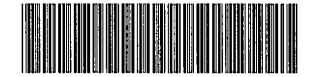
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(Re	questor's Name)	
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PICK-UP	₩ait	MAIL
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Certified Copies	Certificates	s of Status
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COVER LETTER

TO:

TO:		istration Se sion of Cor		*	
oun ir		SEVEN LI	TTLE STARS ACADEMY LI	.c	
SUBJE	.C1:		Name of Lim	ited Liability Company	_
The end	closed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please 1	return	all correspo	ndence concerning this matter	to the following:	
			YOLANDA M CARREN	o	
				Name of Person	
			YOLANDA M CARRENO), INC.	
				Firm/Company	
			14750 SW 26 ST, SUITE	12	
Address					
			MIAMI, FL 33185		phone Number S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) tions hassee eet, Suite 810
				City/State and Zip Code	
			YCARRENO@ATT.NET	to be used for future annual report notification)	_
For fur	ther in	formation c	oncerning this matter, please ca	•	
YOLA	NDA	M CARREN	40	305 554-4032 at ()	
		Name o	f Person	Area Code Daytime Telephone Nur	nber
Enclose	ed is a	check for th	e following amount:		
□ \$ 2:	5. 00 F	iling Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Certi	ficate of Status & fied Copy
	Reg Div P.O	ting Addres distration S dision of C discount Box 632 dahassee, I	Section orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suit Tallahassee, FL 32303	e 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF CORPORATION

22 APR 25 AH 10: 30

SEVEN LITTLE STARS ACADEMY LLC

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

The Articles of Organization for this Limited L	Liability Company were	filed on MAY 3, 2017	and assigned
Florida document number L17000098503			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability o	ompany here:	
The new name must be distinguishable and contain the	words "Limited Liability Co	mpany," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STREE			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u> BOX)</u>		
	_		
B. If amending the registered agent and/or agent and/or the new registered office address		ss on our records, <u>enter the name</u>	of the new registered
Name of New Registered Agent:	JOHANA MORALE	3	
New Registered Office Address:	8765 SW 165 AVE U	NIT 101	
		Enter Florida street address	
	MIAMI	, Florida 331	93-5832
		Tity	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registered provisions of all statutes relative to the propaccept the obligations of my position as regioning filed to merely reflect a change in the company has been notified in writing of this	per and complete perfe istered agent as provic registered office addr	ormance of my duties, and I am fo ded for in Chapter 605, F.S. Or, i	imiliar with and If this document is

gent, 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>	Type of Action
MBR	CARMEN GOMEZ	15392 SW 92 ST	□Add
		MIAMI, FL 33193-5832	Remove
			□Change
MBR	C.E. SIETE ESTRELLAS C.A.	URB LA CORNIZA CALLE CANADA CASA 2	🗆 Add
		PUERTO ORDAZ.,B0. VENEZUELA	■Remove
		 -	Change
			□Add
			□Remove
			□Change
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Effect	ve date, if other than the date of filing: (optional)	
if an eff Note:	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not bent's effective date on the Department of State's records.	to 605.0207 (be listed as (
e recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th dated.	y after the
Dated	APRIL 8, 2022	
	X	
	Signature of a member or authorized representative of a member	
	•	

Filing Fee: \$25.00