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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration S Division of Co			
AMERICA	AN NATIONAL SCHOOL LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	AQEEL AHMAD C/O BII	LL HAVRE	
		Name of Person	
	REGISTERED AGENT IN	NC.	
		Firm/Company	·
	3030 N. ROCKY POINT I	OR. STE 150A	
		Address	
	TAMPA, FL 33607		
		City/State and Zip Code	
	CRYSTOTECHNOLOGIE	-	
	E-mail address: (to be used for future annual report noti	ification)
For further information	concerning this matter, please co	all:	
AQEEL AHMAD		718 9255073	
Name	of Person	at () Area Code Daytim	ne Telephone Number
Enclosed is a check for (the following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addre</u> Registration		Street Address: Registration Se	ection
Division of C		Division of Co	
P.O. Box 633	21	The Centre of T	Lallahassee

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMERICAN NATIONAL SCHOOL LLC

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(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 Liability Compan	y were filed on FEBRUARY 02, 2018 and assigned
Florida document number L18000030842	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
ORANGE COUNTY AMERICAN HIGH SCHOOL LLC	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	841 PRUDENTIAL DR 12TH FL
(Principal office address MUST BE A STREET ADDRESS)	JACKSONVILLE FL 32207
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	841 PRUDENTIAL DR 12TH FL JACKSONVILLE FL 32207
Name of New Registered Agent: Name of New Registered Agent: N/A	address on our records, enter the name of the new registered
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.

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
MGR	Evelyn Torres	841 PRUDENTIAL DR 12TH FL	■ Add
		JACKSONVILLE FL 32207	□Remove
			□ Change
AMBR	Louis Philip Sheldon Jr.	8234 FM 3019	≣Add
		WINNSBORO TX 75494	
			□ Change
AMBR	Imran Aziz	G-D-FLEX-G096, Techno Hub	≅Adđ
		Dubai, Silicon Oasis, Dubai, UAE	\(\sime\) Remove
			□Change
			□Add
			□Remove
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	03/03/2018		
Effective date, if other than the offective date is listed, the date in	he date of filing:	date of filing or more than 90	(optional) days after filing.) Pursuant to 605,0207 (
<u>Note:</u> If the date inserted in this document's effective date on the	block does not meet the applicab	le statutory filing requirem	ents, this date will not be listed as t
e record specifies a delayed effect rd is filed.	tive date, but not an effective tim	e, at 12:01 a.m. on the earl	ier of: (b) The 90th day after the
Pebruary 28	2020		
4	, 1	- -	

Typed or printed name of signee