18000099933

(Requestor's Name)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100350959901



2020 AUG 26 FH 1: 01

をご言い言

C. GOLDEN AUG 2 7 2020

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

entity name <mark>FU</mark>	TURE GENERATION EARLY LEARNING CENTER, LLC
DOCUMENT NUM	BER
	PLEASE FILE THE ATTACHED AND RETURN
XXXXX	Plain Copy
	Certificate of Status
	Certified Copy of Arts & Amendments Certified Copy of Arts & Amendments Complete File (Including Annual Reports)
	Certificate of Status Reflecting:
	APOSTILLE' / NOTARIAL CERTIFICATION
COUNTRY OF DESTA	UNATION
NUMBER OF CERTII	FICATES REQUESTED
TOTAL OWED \$ 25	ACCOUNT # 120160000072

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FUTURE GENERATION EARLY LEARNING CENTER, LLC

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

(A Florida Limited Liability Company)

of Organization for this Limited Liability Company were filed on 4/20/2018

and assigned

	• • •	
The Articles of Organization for this Limited Liability Company	were filed on 4/20/2018	and assigned
Florida document number L18000099933		und ussigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
TI.		
The new name must be distinguishable and contain the words "Limited Liabi	lity 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)		
B. If amending the registered agent and/or registered office a	address on our records, enter the	name of the new register
gent and/or the new registered office address here:	·	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	9
	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>	Address	Type of Action
AMBR	VICTORINE CHARLES	8365 SILVER BIRCH WAY	-
		LEHIGH ACRES, FL 33971	
			□Change
			□Add
			□Remove
			© Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change`.
			□Add
			□Remove
			□Change
			OAdd
			Remove
			□ Change

		·				-
		 .				-
	· · · · · · · · · · · · · · · · · · ·					_
	_	<u> </u>	·			
						•
						-
				· · · · · · · · · · · · · · · · · · ·		•
	-			<u> </u>	 	
			<u></u>			•
					-	
			·			
	<u> </u>	<u></u>			<u> </u>	
	· · · · · · · · · · · · · · · · · · ·		•	· · · · · · · · · · · · · · · · · · ·		
	<u> </u>				· · · · · · · · · · · · · · · · · · ·	
		· · · · · · · · · · · · · · · · · · ·				
		······································				
						
Effective date, if other to fan effective date is listed, the Note: If the date inserted document's effective date	e date must be specific ar in this block does not	d cannot be prior to dat	e of filing or more to statutory filing re-	(option than 90 days after f quirements, this	,	0207 d
record specifies a delayed Lis filed.	effective date, but no	t an effective time, a	t 12:01 a.m. on th	ne earlier of: (b)	The 90th day after	the
ated		20 20				
·						
	/VICTORINE	CHARLES				

Filing Fee: \$25.00