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To:

Division of Corporations

la Department of Stat

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MOORE & MENKHAUS, P.A.

Account Number : I20000000087 Phone : (561)394-7910 Fax Number : (561)393-6541

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SURFSIDE ACADEMY OF PALM BEACH GARDENS, LE

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Τo

(((H2400007312 3))) ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

SURFSIDE A	CADEMY OF PALM BEACH GARDENS, ELC	
(Name of the Limit	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Li Florida document numberL18000175324	ability Company were filed on07/20/2018	and assigned
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "LLC" o	the abbreviation "L.L.C."
Enter new principal offices address, if applie	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE)	<u></u>	
B. If amending the registered agent and/or r	egistered office address on our records, enter th	e name of the new registere
agent and/or the new registered office addres	ss herc:	#R -5
Name of New Registered Agent:		m s e
New Registered Office Address:	8461 LAKE WORTH ROAD, SUITE 126	D 6 D
	Enter Florida sweet address	00 ATE
	LAKE WORTH , Flori	da _ ³³⁴⁶⁷
	Cin	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 Changing Registered Agent, Signature of New Registered Agent

(((H2400007312 3)))

MGR = Manager

To:

or removed from our records:

AMBR = Authorized Member Title <u>Name</u> <u>Address</u> Type of Action _____ □Change _____ 🗀 Remove □Remove _ _ □Add ___ Remove _____ □Change (((H 24C000 87312 3)))

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	JEFFREY	NE ISCHULER	

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