118000 279485

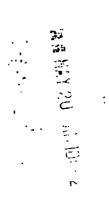
(Paguastada Nama)	
· (Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
,	
(Document Number)	
(Coomence)	
Certified Copies Certificates of Status	
Certificates of Status	-
	_
Special Instructions to Filing Officer:	
	١
	ı





000329594960

000329594960 05/20/19--01038--021 **25.00





Cover Letter

Carlos Alberto Castilla

Address: 10863 Nw 7st Miami, Fl 33172

Email: nextgentraining15@gmail.com

COVER LETTER

TO:

Registration Section

Registration Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations

Division of Cor	porations		
SUBJECT: Nex	+ Gen train Name of Lim	ited Hability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Carlos Alb	Name of Person	
	Went bent	Firm Company	
	WU 68801	7 Street Address	
	Wxtgentra	City/State and Zip Code May 15 @ Bmail Com to be used for future annual report notif	ication)
City/State and Zip Code Wextgentraining to Person For further information concerning this matter, please call: Carlos Castilla at (305) 300-8385 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount:			
Carlos Ca:	Skill Ca of Person	at (<u>305</u>) <u>300-2</u> Area Code Daytime	3385 Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAIL	ING ADDRESS:	STREET/COURI	ER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dext	ben Training		
(Name of the Limite	d Liability Company as it now appe A Florida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited List Florida document number <u>L18005179</u> U	ability Company were tiled on _	12/04/2018	and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liability company	here:	
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the	designation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applica	able:	···	
Principal office address MUST BE A STREE	TADDRESS)		
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE I	<u> </u>		
B. If amending the registered agent and/oregistered agent and/or the new registered of	<u>.</u>	on our records, <u>enter</u>	the name of the new
Name of New Registered Agent:	Carlos Alberto	Casjilla	
New Registered Office Address:	10863 UW 7	ST lorida street address	
		Florida	33172
	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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MER	Carlos Markon Castilla	10863 UW 754 Migm. FL 33	177 X Add
			Remove
			Change
			Add
			Remove
			Change
			Remove
			□ Change
			Remove
			Change
			Remove
			Change
			□ Add
			Remove
			☐ Change

-	
	
	date, if other than the date of filing:
ote: If t	he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a 's effective date on the Department of State's records.
	d specifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the earlier of the record is filed.
ited	5/17/19
	Signature of a member or authorized representative of a member
	Carlos Alberto Castila Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00