

L19000057848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

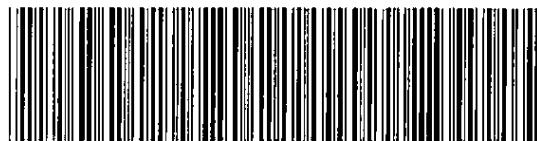
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Meire **CARE**
AUTHORIZATION BY PHONE TO
CORRECT name (A)
DATE: 11/8/23
OR EXAM _____

Office Use Only



800417509958

11/19/23--01019--011 **25.00

FILED
TALLAHASSEE, FLORIDA

2023 NOV - 8 AM 8:47

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 27, 2023

MEIRE RUTH PORTO
6117 RALEIGH STREET, #601
ORLANDO, FL 32835

SUBJECT: ABSOLUTE CHRISTIAN LIMETED LIABILITY COMPANY
Ref. Number: W23000147452

We have received your document for ABSOLUTE CHRISTIAN LIMETED LIABILITY COMPANY and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears the filing submitted has a typographical error in the entity name. Please verify this name and all other information contained in the filing and resubmit it for processing.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan
Regulatory Specialist III

Letter Number: 123A00025086

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SAINT PETER UNIVERSITY LLC

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

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on October, 11 2023 and assigned
Florida document number L19000057848.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ABSOLUTE CHRISTIAN UNIVERSITY LIMITED LIABILITY COMPANY

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

6965 Piazza Grande Ave Suite 309, Orlando FL- 32385

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

6117 Raleigh Street, #601

(Mailing address MAY BE A POST OFFICE BOX)

Orlando, FL 32835

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

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 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 added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Please, Display the New Name on SURBIZ
Website

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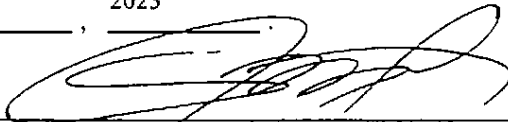
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated Orlando, October 11, 2023



Signature of a member or authorized representative of a member

MEIKE RUTH PORTO

Typed or printed name of signee