L200000 27613

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

Tallahassee, FL 32314

FO: Registration Section Division of Corpo	ion orations			
SURIFCT:	Reliance Giaso	LLC (name	chance to Fi	the Proof Learning (()
	Name of Limi	LLC (Aame		,
The enclosed Articles of Ar	mendment and fee(s) are sub	nitted for filing.		
Please return all correspond	dence concerning this matter	to the following:		
	O _n	Name of Person		
		Name of Person		
		Firm/Company		
		Go W (aming Alm) Address	#946	
		City/State and Zip Code		
		City/State and Zip Code Mainlero Mainlero o be used for future annual report not		
For further information con	ncerning this matter, please ca		in California	
Onvid	Mainers	at (561) Area Code Daytir	36-7316	
Name of I	'erson	Area Code Daytir	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)	Section \$60.00 Filin Certificate Certified Co (additional co	of Status &
Mailing Address: Registration Se		<u>Street Address:</u> Registration Se	ection	
Division of Co	rporations	Division of Co	orporations	
P.O. Box 6327		The Centre of	Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability</u> (A Florida l	Company as it now appears on our reclimited Liability Company)	eords.)
The Articles of Organization for this Limited Liability Co. L20000027673	mpany were filed on	020 and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
Future Proof Learning LLC		
he new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "l	LLC" or the abbreviations L.L.C."
Enter new principal offices address, if applicable:	n/a	020 FE
Principal office address MUST BE A STREET ADDRI	ESS)	
Enter new mailing address, if applicable:	n/a	P
Mailing address MAY BE A POST OFFICE BOX)		-
3. If amending the registered agent and/or registered gent and/or the new registered office address here:	office address on our records, <u>en</u>	ter the name of the new regist
Name of New Registered Agent: n/a	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:		
	Enter Florida street ad	dress
·		, 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>	Address	Type of Action
			Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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Effective date, if other than the	date of filing:		(optional)	
If an effective date is listed, the date must Note: If the date inserted in this bl document's effective date on the D	t be specific and cannot be prior to ock does not meet the application	to date of filing or more thable statutory filing req	an 90 days after filing.) Pursuant t	to 605.0207 e listed as
e record specifies a delayed effectiv rd is filed.	e date, but not an effective tin	me, at 12 <u>:0</u> 1 a.m. on th	e earlier of: (b) The 90th day	after the
January 31 Dated	2020	·		
	ISTO!			
	Signature of a member or author	orized representative of a	nember	