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JUN 1 2021

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: SCHOOL of SUCCESS LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Cabriel Do Carmo Name of Person	
Firm/Company	
12714 Hampton Park Blvd Tampa FL	
Tampa FL 33624 City/State and Zip Code	
City/State and Zip Code  DOCG FMO RFIG 6Mg 1. COM  E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Gabriel Docarmo a. 813, 843-9655	
Name of Person Area Code Daytime Telephone Number	_
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \Bigcup \$55.00 Filing Fee & \Bigcup \$60.00 Filing Fee & \Bigcup Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is	tatus &

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Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

**OF** 

A. If amending name, enter the new name of the limited liability company here:    ShaloM   Capital   Group   LLC	5chool	of	5000	255	LLC		
Florida document number	(Name of the Limited Lin (A Flo	ability Company orida Limited Lia	y as it now appear ability Company)	s en our records	7)		
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  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 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	The Articles of Organization for this Limited Liabilit	ty Company w <u>06</u> 8 16	vere filed on	04/20/	12 ac	and assig	gned
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  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 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  Enter Florida street address	This amendment is submitted to amend the following	g:					
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  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	Shalom Capital	Group	LLC	_	or the abbre	viation "L.L.	C."
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  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	Enter new principal offices address, if applicable:	:					<del></del>
Mailing address MAY BE A POST OFFICE BOX)  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	(Principal office address MUST BE A STREET AL	DDRESS)					
Mailing address MAY BE A POST OFFICE BOX)  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			<del></del>				<del></del>
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	Enter new mailing address, if applicable:					·	
Name of New Registered Office Address:  New Registered Office Address:  Enter Florida street address	(Mailing address MAY BE A POST OFFICE BOX)	2				7.7.7	
Name of New Registered Office Address:  New Registered Office Address:  Enter Florida street address					:	1	<del></del>
New Registered Office Address:  Enter Florida street address	B. If amending the registered agent and/or registered office address her	ered office ad <u>re</u> :	dress on our re	cords, <u>enter t</u>		f the new	registered
Enter Florida street address	Name of New Registered Agent:					<del>Ω</del> ,	<u> </u>
	New Registered Office Address:	the words "Limited Liability Company," the designation "L.I.C." or the abbreviation "L.I.C."  Implicable:  IREET ADDRESS)   Blor registered office address on our records, enter the name of the new registered ddress here:					
			Enter Flori				
City Zip Code		<del></del>	City	, Flo	rida	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
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fan effecti <u>Note:</u> If t	ive date is listed, the date inserted	than the date of he date must be specif in this block does c on the Departmen	fic and cannot be price not meet the apple	icable statutory fil	(opti more than 90 days after ling requirements, the	ional) or filing.) Pursuant to 605. is date will not be liste	.0207 ed as t
record sp	pecifies a delaye	ed effective date, bu	ut not an effective	time, at 12:01 a.m	n. on the earlier of: (I	b) The 90th day after	the
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