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| Special Instructions to Filing Officer: |
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2020 AUG 24 AM 8: 25 SECRETARY OF STATE



### **COVER LETTER**

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

| SUBJECT:                                      | Academy, LLC<br>Name of Lim                  | ited Liability Company  |  |
|---|--|---|--|
|   |  |   |  |
| The enclosed Articles of                      | Amendment and fee(s) are sub                 | omitted for filing.   |  |
| Please return all correspo                    | ndence concerning this matter                | to the following:   |  |
|   | Beverly Pope                                 |   |  |
|   |  | Name of Person  |  |
|   | Pope Wee Academy, LLC                        |   |  |
|   |  | Firm/Company  |  |
|   | 144 SE Wilderness Dr.                        |   |  |
|   |  | Address   |  |
|   | Lake City, FL 32025                          |   |  |
|   | <del></del>                                  | City/State and Zip Code   |  |
|   | Beverlypope386@gmail.co                      |   |  |
| and the second                                |  | to be used for future annual report noti                            | fication)  |
|   | oncerning this matter, please c              |   |  |
| Beverly Pope                                  |  | 386 344-5416<br>at ()   |  |
| Name o  | f Person                                     | Area Code Daytim  | e Telephone Number   |
| Enclosed is a check for th                    | ne 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) |
| Mailing Addres                                |  | Street Address:   | ction  |
| Registration Section Division of Corporations |  | Registration Section Division of Corporations                       |  |
| 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

FILED

Pope Wee Academy, LLC

2020 AUG 24 AM 8: 25

(Name of the Limited Liability Company as it now appears on our recognORETARY OF STATE

(A Florida Limited Liability Company)

TALL AHASSEF, FI TALLAHASSEE, FL The Articles of Organization for this Limited Liability Company were filed on Florida document number 1.20000200877 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Not Applicable The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Not Applicable Enter new principal offices address, if applicable: Not Applicable (Principal office address MUST BE A STREET ADDRESS) Not Applicable Not Applicable Enter new mailing address, if applicable: Not Applicable (Mailing address MAY BE A POST OFFICE BOX) Not Applicable 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: Not Applicable Name of New Registered Agent: Not Applicable New Registered Office Address: Enter Florida street address

#### 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.

City

Not Applicable

\_\_\_\_. Florida Not Applicable

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

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| effect<br><u>e:</u> If | date, if other than the date of filing:  (optional)  ive 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 605.020 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at a effective date on the Department of State's records. |
| cord s<br>ifiled       | pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th  |
| ed <u>F</u>            | Figurt 19 2020.   |
|                        | Signature of a member or authorized representative of a member  |
|                        | The signature of a member of a member   |
|                        |   |