L20 000378516

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(Address)	
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MAR 05 2021

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
	TRAINING LLC		
SUBJECT:	Name of Lim	ited Liability Company	
		•	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	OSVALDO CACERES		
		Name of Person	
	ONE STOP TRAINING O	CENTER, LLC	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	7700 SW 137TH COURT		
		Address	
	MIAMI, FL 33183		
		City/State and Zip Code	
	center2020@gmail.com		
		to be used for future annual report noti	fication)
For further information c	oncoming this matter, please c	all:	
OSVALDO CACERES		305 775-2523	
Name o	f Person		e Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fec & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certificate Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration S Division of C		Registration Se Division of Cor	
P.O. Box 632	-	The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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



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ONE STOP TRAINING LLC

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

B. If amending the registered agent and/or registered office agent and/or the new registered office address here:			
D. Managadia Alexandra and A. 17. A. 1988	address on our	records, <u>enter tl</u>	he name of the new registe
			· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)			
Enter new mailing address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new principal offices address, if applicable:			
		J	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the	designation "LLC"	or the abb.eviation "L.L.C."
A. If amending name, enter the new name of the limited lial ONE STOP TRAINING CENTER, LLC	bility company t	<u>iere</u> :	
This amendment is submitted to amend the following:			
Florida document number L20000378516			
er			

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 = Ma AMBR = Au	nager thorized Member		~ · ·	
Title	Name	Address	2021 JAN 25	Type of Action
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				 Remove

_____ Change

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	The Bright State of the
ctive date, if other than the deffective date is listed, the date must in the date in this block in the date on the Department's effective date on the Department.	date of filing:
ord specifies a delayed effective filed.	date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
d December 31	. 2020
	Prof. Comment
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00