

(((H210001801713)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : KAYALI & CO., P.A.

Account Number : I20160000100 : (813)899-9642 : (813)899-9793 Fax Number

\*\*Enter the email address for this business entity to be used for future: annual report mailings. Enter only one email address please.\*\*

Email Address: in fo 6

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ACADEMY OF BRANDON LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

MAY - 5 2021

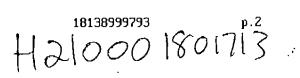
M. SOLOMON

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Help

4-May-2021 13:58 KAYALI FAX

## COVER LETTER



TO:	Registration Section
	Division of Corporations

ACADEMY SUBJECT:	OF BRANDON, LLC	ed Liability Company			
	Name of Limit	ев сивонну соправу			
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.			
Please return all correspo	ndence concerning this matter t	o the following:			
		Name of Person			
	KAYALI & CO., P.A.				
		Firm/Company			
	10630 N 56TH ST, STE 20	5			
		Address		. <del>-</del>	
	TEMPLE TERRACE, FL 2	33617		2821 F	
	<u> </u>	City/State and Zip Code		HAY -	
	INFO@CPAOSK.COM				
	E-mail address: (	to be used for future annual report notiti	cation)		
For further information of	concerning this matter, please co	nll:		AH IO: 20 OF STATE FLELORIO	
OSAMA KAYALI		813 899-9642		<u> </u>	
Name o	of Person	Area Code Daytime	Telephone Number		
Enclosed is a check for t	he foliowing amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	

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

H21000 1801713

## ARTICLES OF ORGANIZATION OF

	<del>_</del>
ompany as it now appears on our records.) mited Liability Company)	
pany were filed on <u>02/04/2021</u>	and assigned
l liability company here:	ده ۔
	3-7/4 <b>66</b>
Liability Company," the designation "LUC" or the s	Boreviacion L.L.E.
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ffice address on our records, <u>enter the na</u>	me of the new registered
Enter Florida street address	
Florida _	
City	Zip Code
<u> </u>	Liability Company," the designation "LLC" or the a  S)  Enter Florida street address  Florida

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 H210001801713 or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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