## L21000244406

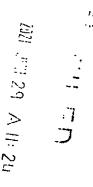
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	Name of	Person	Area Code	Day	time Teleph	none Number		17
PAUL	O SEGARRA		at ()	70-9750				~ 494 ~~ 494
For fur	ther information co	ncerning this matter, please ca	ill:					· i
		E-mail address: (	o be used for future annua	il report r	otification)	)	797	.;;
		305EDUCATIONCENTER	•			٠.		e: 1.
		DORAL FLORIDA 33122	City/State and Zip Code	<u> </u>				
		2500 NW 79TH AVE SUI	TE 157  Address					
		305 EDUCATION CENTE	Firm/Company			· 		
			Name of Person					
		PAULO SEGARRA						
	·	-			,			
		dence concerning this matter (			•			
The end	closed Articles of A	mendment and fee(s) are subr	nitted for filing.	H				
		Name of Limi	ted Liability Company		i.			
SUBJE		TION CENTER LLC		! 	7			
10.	Division of Corpo			· . !				
ro:	Registration Sect	ion	•	11	į.			

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

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

305 EDUCATION CENTER LLC					
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appe Liability Company	ears on our recor	<u>'ds.</u> )		
		5/01 <b>/</b> 2021			,
The Articles of Organization for this Limited Liability Company	were filed on 1	***************************************		_ and assi	gned
Florida document number L21000244406	,	,			
This amendment is submitted to amend the following:	} }				
(Name of the Limited Liability Company as it now appears an our records.) (A Florida Limited Liability Company)  Articles of Organization for this Limited Liability Company were filed on da document number L21000244406  amendment is submitted to amend the following:  f amending name, enter the new name of the limited liability company here:  ew name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  er new principal offices address, if applicable:  recipal office address MUST BE A STREET ADDRESS;  er new mailing address, if applicable:  er new mailing address, if applicable:  and/or the new registered agent and/or registered office address on our records, enter the name of the new registered at and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida					
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the	e designation "LL	.C" or the abbi	eviation "L.l	c."
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)			_ <del>_</del>		
	<del></del>				
Enter new mailing address, if applicable:	-				
(Mailing address MAY BE A POST OFFICE BOX)					
				<u></u>	<u>.:)</u>
	<del></del>			71	• •
B. If amending the registered agent and/or registered office	address on oui	r records, <u>ente</u>	r the name	of the new	<u>registered</u>
agent and/or the new registered office address here:				$\sim$	- 000
				≻	.7
Name of New Registered Agent:					<del></del>
New Registered Office Address:				2	
	Enter I	Florida street addr	<b>1888</b>	-	
	<u>_</u>	, I		_	
	City	•		Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>!</u>				
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance provided for i	of my duties, n Chapter 605	and I am fa 5, F.S. Or. ij	miliar wit f this docu	h and ment is

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 Type of Action Address Title Name 7500 NW 25TH ST SUITE 237 MGR PS BUSINESS SOLUTIONS  $\square$ Add GROUP INC. DORAL, FL 331221 **≅**Remove 6775 NW 169TH ST 30F MGR NG TAX ACCOUNTING &  $\square$ Add REMICES INC. HIALEAH, FL 33015 Change 7500 NW 25TH ST SUITE 237 PS BUSINESS SOLUTIONS **AMBR** CROUP INC. **DORAL FL 33122** Remove 6775 NW 169TH ST 30F NG TAX ACCOUNTING & **AMBR** ■Add SERVICES INC. HIALEAH, FL 33015 \_\_\_ 🗆 Remove \_ 🗆 Change \_\_ □Add □Remove □Add

\_ □Remove

☐ Change

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Effective date, if other th If an effective date is listed, the one Note: If the date inserted in document's effective date of	this block does no	ot meet the applical	o date of filing or mo ble statutory filing	re than 90 days aft	tional) er filing.) Pursuant to his date will not be	o 605.0207 (3 e listed as th
ne record specifies a delayed ord is filed.	effective date, but i	not an effective tin	ne, at 12:01 a.m. o	n the earlier of:	(b) The 90th day	after the
JUNE 24TH Dated		2021				

Filing Fee: \$25.00