Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000336085 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ZENBUSINESS INC.

Account Number : 120230000190

: (844)449-3624

Fax Number

: (512)597-0678

**Enter the	email a	address	for	this	busin	ess	entity	to	be	used	For	futi	-() P
Enter the annual	l report	. mailin	gs.	Enter	only	one	email	addi	ress	s ple	ase.	* **********************************	

E	٠.	1	Address:	

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OCT 38 2024

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Tallahassee, FL 32314

2024-10-05-05:30:25 UTC+14 COVER LETTER

18506176383

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

From: ZenBusiness User

TO: Registration Se Division of Con					
	ser Academy LLC				
SUBJECT:	Name of Lim	ited Liability Company			
		Const Constitution			
	Amendment and fee(s) are sub	_			
Please return all correspondence	ondence concerning this matter	to the following:			
	Jonathan Taboada				
		Name of Person			
	ZenBusiness INC				
		Firm/Company			
	336 E. College Ave Suite	301			
		Address			
	Tallahassee, FL 32301				
		City/State and Zip Code			
	fulfillment@zenbusiness.co	om to be used for future annual report noti	fication)		
For further information of	concerning this matter, please c		,		
c/o ZenBusiness INC		844 493-6249			
	of Person	at ()	ie Telephone Number		
		,	·		
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
<u>Malling Addre</u>		Street Address:			
Registration Section		Registration Section Division of Corporations			
Division of Corporations P.O. Box 6327		The Centre of Tallahassee			

To:

2024-10-05 05:30:25 UTC+14 188 ARTICLES OF AMENDMENT 18506176383 TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as It now appears on our records.) Liability Company)				
he Articles of Organization for this Limited Liability Company orida document number L21000280462.	were filed on 2021-06-16	and assigned			
his amendment is submitted to amend the following:					
. If amending name, enter the new name of the limited liab	ility company here:				
ie new name must be distinguishable and contain the words "Limited Liabi	ity Company," the designation "LLC" or the	ac abbreviation "L.L.C."			
1215 Ont Sold Inc 200					
nter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)	Brandon, FL 33509				
THE PART OF THE WAR COLOR OF THE PART OF T	Hillsborough County US				
nter new mailing address, if applicable:	1315 Oakfield Dr 209				
1ailing address MAY BE A POST OFFICE BOX)	Brandon, FL 33509	_			
	Hillsborough County US	924			
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the r</u>	name of the new regis			
Name of New Registered Agent:		AMI:			
		2			
New Registered Office Address:	Enter Florida street address	ļ • I			

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

Florida

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ı	IJ	

Page: 4 of 5 2024-10-05 05:30:25 UTC+14 18506176383 From: ZenBusiness User in amending Authorized Person(s) authorized to manage, enter the one, 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
AMBR	Christopher Thomas	1315 Oakfield Dr 209	□Add
		Brandon, FL 33509	□ Remove
		US	■Change
			
			□Remove
			□ Change
-			\ \ \ \ \
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

Īo:

Filing Fee: \$25.00