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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TC:

Registration Section

Tallahassee, FL 32314

Division of Co	rporations		
PRINTER	S ACADEMY ON LINE, LLC		
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	CARLOS A GALLASTE	GUI	
		Name of Person	
	CAG FINANCIAL CONS	ULTANTS LLC	
		Firm/Company	
	VD UNIT 970751		
		Address	
	COCONUT CREEK FL 3	3097-0751	
		City/State and Zip Code	
	CARLOS.GALLASTEGUI	~	
	E-mail address: (to be used for future annual report notification)	
For further information	concerning this matter, please c	all: S 😕	
CARLOS A GALLAST	EGUI	561 756-2821 TACK 22 AU	77
Name	of Person	Area Code Daytime Telephone Number	
Enclosed is a check for t	the following amount:	PM 2: \SSEE.	
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)	
Mailing Addre Registration		Street Address: Registration Section	
Division of Corporations		Division of Corporations	
P.O. Box 633		The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRINTER'S ACADEMY ON LINE, LLC

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	-
The Articles of Organization for this Limited Liability Company Florida document number L21000506733	were filed on 12/01/2021 and a	assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if applicable:	<u> </u>	
(Principal office address MUST BE A STREET ADDRESS)	TALLAH	
Enter new mailing address, if applicable:	ASSI ASSI	2 5
(Mailing address MAY BE A POST OFFICE BOX)	E.S. T. T.	2: 35
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name of the r</u>	new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida City Zip Coo	ie

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 or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	FRANCISCO J MONTEVERDE R	3870NE 167TH STREET	\equiv A dd
		NORTH MIAMI BEACH FL 33160	□Remove
			Change
MBR	DANIEL J MONTEVERDE CRUZ	2375 O'FARRELL ST. UNIT 5	■Add
		SAN FRANCISCO CA 94115	
			Change
			SECRETAR TALLAHI
			Change T
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

Effective date, if other than the date of filing: (If an effective 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 605.0207 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the cord is filed. Dated AUGUST 11 2022	·· ·· -·······························	other information, enter	8 -(**)	,	,	
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	Dated AUGUST 1	ı	2022			
MANAGER		Signature of	a-member or authorized		ANAGER	
CAG FINANCIAL CONSULTANTS, LLC. EARLOS A. GALLASTEGUI REGISTERED AGENT Typed or printed name of signee	CAG FI	NANCIAL CONSULTAN		GALLASTEGUI REGIS	TERED AGENT	

Filing Fee: \$25.00