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COVER LETTER

TO:	Registration Se Division of Cor					
FREE TO GROW ACADEMY 2 LLC SUBJECT: Name of Limited Liability Company						
						The encl
Please re	eturn all correspo	ndence concerning this matter	to the following:			
		RACHEL KELLEY				
	Name of Person					
	FREE TO GROW ACADEMY 2 LLC					
	Firm/Company					
	900 3RD STREET EAST					
Address						
BRADENTON FL 34208						
City/State and Zip Code						
	WHITEHEADBC@GMAIL.COM E-mail address: (to be used for future annual report notification)					
For furth	ner information c	oncerning this matter, please ca	·			
RACHE	EL KELLEY		941 773-5062			
Name of Person		Area Code Daytimo	e Telephone Number			
Enclose	d is a check for th	ne following amount:				
■ \$ 25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address: Registration Section			Street Address: Registration Sec	ction		
Division of Corporations			Division of Corporations			

P.O. Box 6327 Tallahassee, FL 32314

TO:

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FREE TO GROW ACADEMY 2 LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on _____04-08-2022 and assigned Florida document number 1.22000170466 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

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>	<u>Address</u>	Type of Action
MGR	RACHEL KELLEY	900 3RD STREET EAST	■Add
		BRADENTON FL 34208	
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
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