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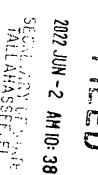
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COVER LETTER

TO:

TO:	Registration Section Division of Corporations		Consu/	h
SUBJE	CCT: Florida A Cadel Name of Limi	My For On lin ited Liability Company	eTraining and	
The en	closed Articles of Amendment and fee(s) are sub-	mitted for filing.		
Please	return all correspondence concerning this matter	to the following:		
	Hossa	Name of Person		
		Firm/Company		
	515 N B	S.†		
	Pensac Hossam	o/a - 3 2 5 City/State and Zip Code 2 2 5 1 @ /a h o o to be used for future annual report noti	- Com	
For fur	ther information concerning this matter, please ca			
<i>L</i>	Name of Person	at () 85 o Area Code Daytim	2213957 e Telephone Number	
Enclos	ed is a check for the following amount:			
□ \$2	5.00 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 Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations fallahassee e Street, Suite 810	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Florida Academy For	2022 JUN-2 AM 10: 38 on line Training and consuling as it now appears on our records ALLAHASSEE, HILL C'I
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records MLLAHASSEE, WILL C."
The Articles of Organization for this Limited Liability Company Florida document number <u>L22 o 00 1968</u> .79	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	
The new name must be distinguishable and contain the words "Limited Liabil	Training and consulting Lity Company," the designation "L.I.C." or the abbreviation "L.I.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	515 NB St pensacola - 32501
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	pensacola - 32501
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent: 4055	am Yousse F 3 St Emer Florida sweet address
	aco/a Florida 32501 Zip Code
New Registered Agent's Signature, if changing Registered Agent;	
I hereby accept the appointment as registered agent and agre	ee to act in this capacity. I further agree to comply with the

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

Jourse

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 Title Address \square Add □Remove □Change \square Add □Remove □Change □Remove ____ □Change \Box Add □Remove ☐ Change \square Add □Remove □ Change Joursel □Remove

___ □Change

re date, if other than the date of filing:	The nam	en: A	2 Flo	rida	Acade
Training and consulting without the date of filing:	For only	ng Train	ningar	nd con	sult;
Training and consulting without the form of the date of filing or more than 90 days after filing.) Pursuant to 605.6 fithe date in this block does not meet the applicable statutory filing requirements, this date will not be listent's effective date on the Department of State's records. 5-31-2022	want k	? emov	e(For)Fro	MACO
Training and consulting without the form of the date of filing or more than 90 days after filing.) Pursuant to 605.6 fithe date in this block does not meet the applicable statutory filing requirements, this date will not be listent's effective date on the Department of State's records. 5-31-2022	Name -	To Be: 1	Florida	1 A COO	lemyo
The date, if other than the date of filing: (optional) the 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 605.4 fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listent's effective date on the Department of State's records. specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after d. 5-31-2022					
re date, if other than the date of filing:	(for).	<u> </u>			SECNILAR
cetive date, if other than the date of filing:	Than	Lyon			2 AM IO:
cetive date, if other than the date of filing:	Hos	sam ya	onssef		m &
5-31-2022	ve date, if other that the a ctive date is listed, the date must if the date inserted in this blo	date of filing: be specific and cannot be prock does not meet the app	ior to date of filing or mor licable statutory filing	than 90 days after fil	ling.) Pursuant to 605.0
	specifies a delayed effective d.	date, but not an effective	e time, at 12:01 a.m. on	the earlier of; (b)	The 90th day after t
Yoursel	5-31-2		_ .		
Signature of a member or authorized representative of a member			el -		

Filing Fee: \$25.00

. . .