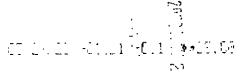
LABOO04847A3

(Requestor's Name)
(Äddress)
(Address)
(City/State/Zip/Phone #)
(ON)/Otata/Zipii Holic //
PICK-UP WAIT MAIL
(Business Entity Name)
(Bosinoss Linky Hame)
(Document Number)
Continue of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





000409386640



A - D - D - C - G

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

•	INSTRUCTION GROUP LLC	
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our ited Liability Company)	records.)
The Articles of Organization for this Limited Liability Comp. Florida document number $\frac{L22000484723}{L22000484723}$.	pany were filed on11/14/202	2 and assigned
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 I	Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		- '-
		".)
Enter new mailing address, if applicable:		J.
Mailing address MAY BE A POST OFFICE BOX)		-1
		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered office and/or the new registered office address here:	fice address on our records,	enter the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	address
	(7)	, Florida Zip Code
	City	гір Соде

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 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
P	MGR	CLARA T. GUTIERREZ	≣ Add
		ANA T. GUTIERREZ	■Remove
			□Change
		 	
			Remove
			Chẳnge
			□Add ₅
			Change
			□ Add
			□Remove
			Change
			\ _ \ _ _Add
			Remove
			☐ Change
			□ Add
			Remove

 						
						
					· · · · · · · · · · · · · · · · · · ·	
						<u> </u>
						,
						·
						7 v
						· -
						<u> </u>
n effective date te: If the dat	if other than the is listed, the date mus e inserted in this blo ctive date on the De	the specific and car ock does not mee	mot be prior to d t the applicable	ate of filing or mor	(opti e than 90 days after requirements, thi	onal) r filing.) Pursuant to 605.0 s date will not be listed
is filed.						o) The 90th day after t
ted 5	24 200	<u>.3</u>	·			
	•• • •••	Signature of a men	ber or authorize	rd representative o	f a member	
			J	AUTIER		