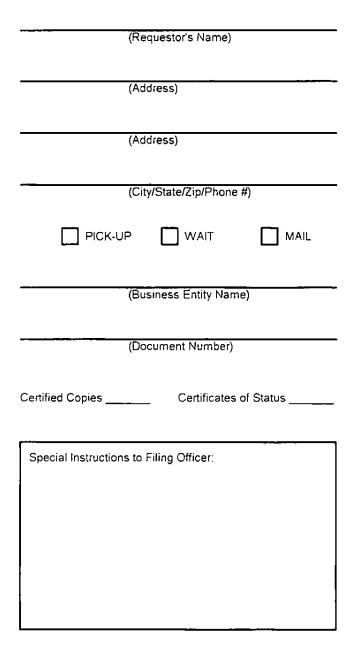
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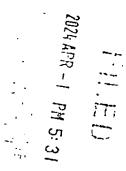


Office Use Only



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COVER LETTER

Registration Section
Division of Corporations

Tallahassee, FL 32314

TO:

| ٠. | » MONTESSORI CI | LUB LLC | | | |
|------------------------------|---|--|--|--|--|
| SUBJECT: | Name of Limi | ited Liability Company | 4, | | |
| The enclosed Articles of | Amendment and fee(s) are sub- | mitted for filing. | | | |
| Please return all correspo | ondence concerning this matter | to the following: | | | |
| | ELIANA M LUGO CARD | 0020 | | | |
| | Name of Person | | | | |
| | MONTESSORI CLUB LL | С | | | |
| | | Firm Company | | | |
| | 978 TRAMELLS TRAIL | | | | |
| | Address | | | | |
| | KISSIMMEE FL 34744 | | | | |
| | | City/State and Zip Code | | | |
| | ELIANALUGO0603@GM. | | | | |
| | E-mail address: (1 | to be used for future annual report notif | ication) | | |
| For further information c | oncerning this matter, please ca | all: | | | |
| EVELYN R GONZALE | Z EA | 407 281-0227 | | | |
| Nume of Person | | Area Code Daytime | Telephone Number | | |
| Enclosed is a check for the | ne following amount: | | | | |
| □ \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) | | |
| Mailing Address Registration | | Street Address: Registration Sec | ction | | |
| Division of C | Corporations | Division of Cor | porations | | |
| P.O. Box 632 | 27 | The Centre of T | allahassee | | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| MONTESSORI C | | |
|--|---|------------------------------------|
| (Name of the Limited Liability Com) (A Florida Limited | pany as it now appears on our r d Liability Company) | ecords.) |
| The Articles of Organization for this Limited Liability Comparation document number | ny were filed on FEBRUAR | Y 13, 2023 and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited lia | ability company here: | |
| The new name must be distinguishable and contain the words "Limited Lia | bility Company," the designation | "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | 20 |
| Principal office address MUST BE A STREET ADDRESS) | | 2024 |
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| | | -p i |
| Enter new mailing address, if applicable: | • | |
| Mailing address MAY BE A POST OFFICE BOX) | | -·· α |
| | | <u>N</u> |
| 3. If amending the registered agent and/or registered office gent and/or the new registered office address here: Name of New Registered Agent: | e address on our records, <u>s</u> | enter the name of the new regist |
| raine of their registered register. | | ·-·· |
| New Registered Office Address: | Enter Florida street e | nddraec |
| | ътст гуотиа месен | шиг сээ |
| - | Cin | Florida Zip Code |
| | City | Zip Code |

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

| MGR = : | Manager Authorized Member | | |
|--------------|------------------------------|---------|--------------|
| <u>Title</u> | <u>Name</u> | Address | Type of Acti |
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| MONTESSORI ELEMENTARY | SCHOOL AND PE | RE-SCHOOL | | | |
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| ctive date, if other than the da effective date is listed, the date must be e: If the date inserted in this block ament's effective date on the Depa | specific and cannot be does not meet the a | pplicable statutor | ng or more than 90 days | optional) after filing.) Pursuant to this date will not be | o 605.026 e listed a |
| ord specifies a delayed effective da filed. | ite. but not an effect | ive time, at 12:0) | a.m. on the earlier of | f: (b) The 90th day | after th |
| MARCH IS | 2024 | | | | |
| - 1 1 | <u> </u> | · · | | | |

Filing Fee: \$25.00