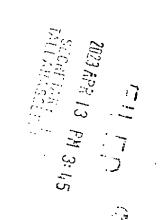


| (Requestor's Name) | |
|---|-------------------------|
| (Address) | |
| (Address) | <u>.</u> . |
| (City/State/Zip/Phone | e #) |
| PICK-UP WAIT | MAIL |
| (Business Entity Nar | ne) |
| (Document Number) | |
| Certified Copies Certificates | s of Status |
| Special Instructions to Filing Officer: | |
| | J. HORNE APR 14 2023 |

Office Use Only







CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

| Phone: 850-558-1500 |
|---|
| ACCOUNT NO. : 12000000195 |
| REFERENCE : 671261 7681332 |
| AUTHORIZATION : |
| COST LIMIT : \$25.00 |
| ORDER DATE : April 12, 2023 |
| ORDER TIME : 9:52 AM |
| ORDER NO. : 671261-005 |
| CUSTOMER NO: 7681332 |
| DOMESTIC AMENDMENT FILING NAME: SCHOOL THREAT LLC |
| EFFECTIVE DATE: |
| ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: |
| CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING |
| CONTACT PERSON: Eyliena Baker EXT# |

EXAMINER'S INITIALS:

COVER LETTER

.

TO:

| | egistration Sectivision of Cor | | | |
|-------------|------------------------------------|--|--|------------------------------------|
| SUBJECT | | THREAT LLC | | |
| SUBJECT | : | Name of Lim | ited Liability Company | |
| The enclos | ed Articles of a | Amendment and fee(s) are sub | mitted for filing. | |
| Please retu | m all correspo | ndence concerning this matter | to the following: | |
| | | JAMAAL COLEMAN | | |
| | Name of Person BECKER & POLIAKOFF | | | |
| | | PAREAT LLC Name of Limited Liability Company Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: JAMAAL COLEMAN Name of Person BECKER & POLIAKOFF Firm/Company 45 BROADWAY 17TH FLOOR Address NEW YORK, NY 10006 City/State and Zip Code jcoleman@beckerlawyers.com E-mail address: (to be used for future annual report notification) oncerning this matter, please call: 212 Area Code Daytine Telephone Number e following amount: \$\text{\$\text{\$\text{S}\text{3}\text{0}\text{0}}} \text{\$\text{\$\text{Certificate of Status}}} \text{\$\text{\$\text{Certificate of Status}}} \text{\$\text{\$\text{Certificate Opy} \text{\$\text{(additional copy is enclosed)}}} \text{\$\text{\$\text{Street Address:} \text{ection} \text{\$\text{Person}\text{\$\text{Certificate Opy} \text{(additional copy is enclosed)}}} \text{\$\text{\$\text{Certificate of Status}}} \text{\$\text{\$\text{Certificate of Status}}} \text{\$\text{Certificate of Status}} \text{\$\text{Certificate of Status} | | |
| | | | Firm/Company | |
| | | 45 BROADWAY 17TH F | LOOR | |
| | | | Address | |
| | | NEW YORK, NY 10006 | | |
| | | | City/State and Zip Code | |
| | | | | |
| | | E-mail address: (1 | to be used for future annual report notification) | |
| For further | information co | oncerning this matter, please ca | all: | |
| Jamaal Co | leman | | | |
| | Name of | Person | | umber |
| Enclosed is | a check for th | e following amount: | | |
| ≡ \$25.00 | Filing Fee | | Certified Copy Certified Copy is enclosed) Certified Copy is enclosed) | rtificate of Status & rtified Copy |
| | ailing Address | | | |
| | ivision of Co | | | |
| Ρ. | O. Box 632 | 7 | The Centre of Tallahassee | |
| Ta | allahassee, F | L 32314 | 2415 N. Monroe Street, Su | iite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SCHOOL THREAT LLC

company has been notified in writing of this change.

| (<u>Name of the Limited Liability Compa</u> (A Florida Limited I | ny as it now appears on our re | ecords.) | |
|--|-----------------------------------|-------------------------------------|--|
| (A Fiorida Billinea F | Salvini Company i | 18 3 0 | |
| The Articles of Organization for this Limited Liability Company | were filed on MARCH 24, | 2023 and assigned | |
| Florida document number <u>L23000150885</u> | | 3 PA | |
| This amendment is submitted to amend the following: | | 元 5 | |
| A. If amending name, enter the new name of the limited liab | ility company here: | 5 | |
| SCHOOL THREATS LLC | | • | |
| 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: | | | |
| (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 a | iddress on our records, <u>ei</u> | nter the name of the new registered | |
| agent and/or the new registered office address here: | | | |
| | | | |
| Name of New Registered Agent: | | _ | |
| New Registered Office Address: | | | |
| New Registered Office Address. | Enter Florida street address | | |
| | | | |
| | Cirv | , Florida Ziv Code | |
| New Registered Agent's Signature, if changing Registered Agent: | • | | |
| | | | |
| I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete | | | |

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

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 |
|--------------|-------------|---------------|----------------|
| | | | |
| | | | |
| | | | Change |
| | | | |
| | | | Remove |
| | | \(\tag{Cha} | TChange |
| | | | |
| | | | =Remove |
| | | | TChange |
| | | . | |
| | | | |
| | | | |
| | | | |
| | | | Remove |
| | | | |
| | | | |
| | | | |

| | <u> </u> | | | | | |
|---|-----------------|-------------------|--------------------|--|--|---------------------------|
| | | | | | | |
| | | | | | | |
| | | | | <u>,</u> | | |
| | | | - | | | |
| | | | | | | |
| | | | | | | |
| | | | | · · · · · · · · · · · · · · · · · · · | - | |
| | | | | | . | |
| | | | | | | |
| | | | | | | |
| | | | | | | _ |
| | _ | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | - | | | |
| | | | | | | |
| | | | | | | |
| | | - | | | | |
| | | | | | . | |
| ffective date, if other than the an effective date is listed, the date muliote: If the date inserted in this bocument's effective date on the f | lock does not i | meet the applic | able statutory fi | (o) r more than 90 days a ling requirements, | ptional) fler filing.) Pursuant to this date will not be | 605.0207 (listed as t |
| record specifies a delayed effecti l is filed. | e date, but no | t an effective ti | ime, at 12:01 a.i | n, on the earlier of | (b) The 90th day | after the |
| ated APRIL 12 | | . 2023 | | | | |
| /s/ Donald Beele | r | | | | | |
| | Signature of a | member or author | orized representat | ive of a member | | _ |
| | | | • | | | |