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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

TO: Registration Section **Division of Corporations**

| | TERY ACADEMY, LLC | | |
|-----------------------------|--|---|--|
| SUBJECT: | Name of Lim | ited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | Anthony Borda | | |
| | | Name of Person | |
| | VGC MASTERY ACADE | EMY, LLC | |
| | | Firm/Company | |
| | 13741 Lensdale Lane | | |
| | · · · · · · · · · · · · · · · · · · · | Address | ···· |
| | Windermere, FL 34786 | | |
| | vgcorner.pkmn@gmail.com | City/State and Zip Code | |
| | E-mail address: (| to be used for future annual report noti | fication) |
| For further information of | oncerning this matter, please c | all: | |
| Anthony Borda | | 407 766-7886 at () Area Code Daytim | |
| Name o | f Person | Area Code Daytim | e Telephone Number |
| Enclosed is a check for the | he 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| VGC MASTERY ACADEMY, LLC | 4 | 444 - 3 - 2 P. 2: 30 |
|---|--|---------------------------------------|
| (Name of the Limited Lia (A Flo | bility Company as it now appears on our records.) rida Limited Liability Company) | |
| he Articles of Organization for this Limited Liability | y Company were filed on March 31, 2023 | and assigned |
| orida document number L23000161934 | | |
| nis amendment is submitted to amend the following | : | |
| . If amending name, enter the new name of the l | imited liability company here: | |
| ne new name must be distinguishable and contain the words | Limited Liability Company," the designation "LLC" of | or the abbreviation "L.L.C." |
| nter new principal offices address, if applicable: | | |
| Principal office address MUST BE A STREET AD | DRESS) | · · · · · · · · · · · · · · · · · · · |
| | | |
| | | |
| nter new mailing address, if applicable: | | |
| Mailing address MAY BE A POST OFFICE BOX | | |
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| If amending the registered agent and/or registe gent and/or the new registered office address her | | e name of the new regist |
| gent and/or the new registered office address her | <u>e</u> . | |
| Name of New Registered Agent: | | |
| | | |
| New Registered Office Address: | Enter Florida street address | |
| | Pl | i.i. |
| | , rior | ida 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 |
|-------------------------------|------------------|------------------|

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> | Name | Address | Type of Action |
|--------------|---------------|---|----------------|
| AMBR | Anthony Borda | 13741 Lensdale Lane, Windermere, FL 34786 | □Add |
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| Effective date, if other than the date in effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department. | e specific and cannot be prior t k does not meet the applica | o date of filing or more than 9 | | |
| e record specifies a delayed effective of rd is filed. | date, but not an effective tin | ne, at 12:01 a.m. on the ea | rlier of: (b) The 90th day aft | er the |
| Dated | 2023 | | | |
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| My M | gnature of a member or author | rized representative of a mem | ber | |