L23000412982

(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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DEFINE IMENT OF STATE
DEFINE OF CORPORATIONS
TALL ANALSES F. FLORIDA

A. PARISHANI DEC 0 9 2023

COVER LETTER

TO: Registration Se Division of Con		•	
	nool of Real Estate, LLC	,	
SUBJECT:	Name of Lin	nited Liability Company	2023 DEP DIVISE TALL
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	2023 NOV 27 DEPARTMENT TALLAHASSE
Please return all correspo	ondence concerning this matter	to the following:	
	Quinesha Adderly-Hawkin		AM 6: 23 OF STATE RPORATION: E. FLORIDA
		Name of Person	
	Atlante School of Real Est	tate, LLC	
		Firm/Company	
	584 NW University Blvd.	#350	
		Address	
	Port St. Lucie, FL 34986		
		City/State and Zip Code	
	Quinesha.realtor@gmail.co		
		to be used for future annual report	notheation)
For further information of	concerning this matter, please c	all:	
Quinesha Adderly-Hawk	cins	561 494-502	6
Name o	of Person		ytime Telephone Number
Enclosed is a check for t	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		Street Addres Registration	_
Division of C	Corporations	Division of	Corporations

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Atlante School of Real Estate, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{09/05/2023}{}$ Florida document number <u>L23000412982</u> 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 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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>	<u>Name</u>	Address	Type of Action
AMBR	Paige Hails	584 NW University Blvd. #350	Add
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an effective date is listed, the date n lote: If the date inserted in this	ust be specific and block does not n	cannot be prior to seet the applica	to date of filing of able statutory fi	r more than 90 days ling requirement:	after filing.) Pi	ursuant to 605,020 ll not be listed a
ocument's effective date on the	Department of S	tate's records.				
record specifies a delayed effect lis filed.	ive date, but not	an effective tir	me, at 12:01 a.n	n, on the earlier o	of: (b) The 9	Oth day after the
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