L23000415581

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
		
Special Instructions to	Filing Officer:	
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TO: Registration Se Division of Cor			·
GET COMI	FORTABLE DRIVING SCHO	OOL, LLC	
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	ROBERT D. GROOTT	GROUCUTT	
		Name of Person	
	GET COMFORTABLE D	RIVING SCHOOL, LLC	
		Firm/Company	
	455 ALT 19S, 250		
		Address	
	PALM HARBOR, FL 346	683	
		City/State and Zip Code	
	ROBERT.GROCUTT@YA		
		to be used for future annual report notif	ication)
For further information co	oncerning this matter, please c	all:	
ROBERT GROCUTT (Sroucutt -	727 483-0515	
Name of	(Person	at (at Code Daytime	e Telephone Number
Enclosed is a check for th	e 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		Street Address:	
Registration S Division of C		Registration Sec Division of Cor	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GET COMFORTABLE DRIVING SCHO	,			
(Name of the Limited Lia (A Flo	bility Company as it now appears on our records.) rida Limited Liability Company)			
The Articles of Organization for this Limited Liability	y Company were filed on SEPTEMBER 6, 2023	a	ınd assign	ed
Florida document number L23000415581	·			
This amendment is submitted to amend the following	;			
A. If amending name, enter the new name of the l	ng 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 abb	reviat	tion "L.L.C.	, n
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET AD	DRESS)			
		<u> </u>	2023	
Enter new mailing address, if applicable:		<u> </u>	SE	<u>···</u>
(Mailing address MAY BE A POST OFFICE BOX)		<u>.,, }</u>	_ = _	· · · · ·
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B. If amending the registered agent and/or registe agent and/or the new registered office address her		of t	<u>he new re</u> പ	gistered
agent and of the new registered office address her	Ŀ	Ξ, '	Ň	
Name of New Registered Agent:				<u>.</u>
New Registered Office Address:				
	Enter Florida street address			
	, Florida	7:-	Code	
	LIIV	LID	LOGE	

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>	Name	Address	Type of Action
MGR	GROUCUTT ROBERT D. GROCUM	455 ALT 19S, 250, PALM HARBOR, FL 34683	= Add
			□Remove
			□Change
			□Remove
			□Change
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Filing Fee: \$25.00