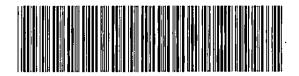


(Red	questor's Name)	
(Add	Iress)	
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(City	/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Name)	
(Doc	cument Number)	
Certified Copies	Certificates of S	Status
Special Instructions to F	iling Officer:	
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CONTACT INFORMATION

ALEX VELOUDOS

2457 TREEMONT WAY

DUNEDIN, FLORIDA 34698

PH: 727-798-7785

AVELOUDOS@ATHENIANACADEMY.ORG

COVER LETTER

TO:

TO: Registration So Division of Con				
	npians Pre School			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Alex Veloudos			
		Name of Person		
	Little Olympians Preschoo	ol		
	<u> </u>	Firm/Company		
	J457 256 7 Treemont Way			
		Address		
	Dunedin, Florida 34698			
		City/State and Zip Code		
	aveloudos@athenianacader	ny.org to be used for future annual report no	different and	
For further information c	oncerning this matter, please c	·	micanon	
Alex Veloudos		727 7987785		
Name o	f Person	Area Code Dayti	me Telephone Number	
Enclosed is a check for the	ne 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 Fec, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres Registration 9		Street Address: Registration S	ection	
Division of C	orporations	Division of Co	orporations	
P.O. Box 632 Tallahassee, l			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Little Olympians Pre School LLC					
(Name of the Limit	ed Liability Compa (A Florida Limited)	i <mark>ny as it now appears on our i</mark> Liability Company)	records.)		
The Articles of Organization for this Limited Liability Company were filed on Feb.2 ,2024 Florida document number L24000062273				_ and assigned	
This amendment is submitted to amend the folk	owing:				
A. If amending name, enter the new name of	the limited li <u>ab</u>	ility company here:			
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation	"LLC" or the abbre	viation "L.L.C."	
Enter new principal offices address, if applic	able:		C.1 417	202	
(Principal office address MUST BE A STREE	T ADDRESS)				
Enter new mailing address, if applicable:		2457 Treemont Way	50 00 00 00 00 00 00 00 00 00 00 00 00 0	₹ M ₩ D	
(Mailing address MAY BE A POST OFFICE BOX)		Dunedin, Florida 34698		<u></u>	
B. If amending the registered agent and/or ragent and/or the new registered office address		address on our records, <u>c</u>	enter the name o	f the new registere	
Name of New Registered Agent:	SAME				
New Registered Office Address:	2457 Treemont				
		Enter Florida street d			
	Dunedin		_, Florida <u></u>	71. 6. 1	
New Registered Agent's Signature, if changing B	legistered Agent:	City		Zip Code	
I hereby accept the appointment as registered provisions of all statutes relative to the propo- accept the obligations of my position as region being filed to merely reflect a change in the re company has been notified in writing of this	er and complete stered agent as p registered office	performance of my dution provided for in Chapter (es, and I am fam 605, F.S. Or, if t	iliar with and his document is	

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>	<u>Address</u>	Type of Action
P	Alex Veloudos	2457 Treemont Way	■Add
		Dunedin, Florida 34698	□Remove
			□Change
D	Doug Cuveron	11851 Oak Center Drive	🗀 Add
		Ft. Myers, Florida 33967	■Remove
			□Change
AMBR Stacey Anderson	Stacey Anderson	18851 Oak Center Drive	🗀 Add
		Ft. Myers, Florida 33967	≡Remove
			□Change
AMBR	Angela Combs	18851 Oak Center Drive	□Add
		Ft. Myers, Florida 33967	=Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change

. If amending any other inf	formation, enter change(s) here: (Attach additional sheets, if necessary.)
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Note: If the date inserted in	the date of filing: Feb. 2, 2024 (optional) ate must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3) this block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
the record specifies a delayed except is filed.	ffective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated May 23	. 2024
<u> </u>	Signature of a member or authorized representative of a member
Alex Veloudos	
THE TERMINA	Typed or printed name of signee