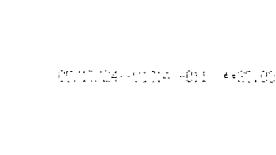
L24 000 167

(Requestor's Name)			
(Address)			
,			
(A.U.)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Little Pregionings Academy of Bayran Beach LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
Name of Person
GALLE BEGINDINGS ACCREDING BEACH LL
1263 Gondala C+
Baynton Beach, Fr 33424 CityState and Zip Code Succession (Company) E-mail/address: (to be used for future aliminal report notification)
For further information concerning this matter, please call:
Sucoly Lep-27 at (50) 541-0362 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S S30.00 Filing Fee S Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

(Name of the Limited Liability Comp	anv as is now appears on our records.)	on Beach LL
(A Florida Limited	Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on $409 70$	and assigned
Florida document number L2400 1677		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or	the abbreviation "L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		- 3 - 3
Enter new mailing address, if applicable:		755 7
(Mailing address MAY BE A POST OFFICE BOX)		5 5
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	
	City	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	Surely 10ptz	1263 Gendoki (4 Bapail) Beach, Fr 33426	🗆 Add
			□Remove
			□Change
			□Add
			□Remove
		.	□Change
			□ Add
			□Remove
			□Change
			🗆 🗅 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
		 	🗆 Add
			□Remove
			□Change

D. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
(If an effective Note: If the	late, if other than the date of filing:
If the record sperecord is filed.	ecities a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated <u>C</u>	Signature of a number or authorized representative of a member
	Sucely to per Typed or printed name of signee

Filing Fee: \$25.00