## L25000304984

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(City/State/Zip/Phone #)
(OR) State Ziph Hone #)
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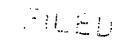
## **COVER LETTER**

TO:

TO:	Registration Sec Division of Corp			•
orin ir	rh & 374	B&G A	CADEMY LLC	
SUBJE	ECT:	Name of Limi	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		NICOLAS BADELL		
			Name of Person	
			Firm/Company	
		3131 NE 188 ST, APT 260	99	
		AVENTURA, FL 33180	Address	
			<del></del>	
		JBADELL@BADELLGRA	City/State and Zip Code AU.COM	
		E-mail address: (	to be used for future annual report not	ification)
For fu	rther information co	oncerning this matter, please ca	all;	
NICO	LAS BADELL		786 3018316	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclos	sed is a check for th	e following amount:		
<b>≅</b> \$2	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 Addres Registration S		<u>Street Address:</u> Registration Se	ection
	Division of C	orporations	Division of Co	rporations
	P.O. Box 632		The Centre of	
	Tallahassee, I	`L 34314	2410 N. MONTO	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



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## **B&G ACADEMY LLC**

(Name of the Limited Liability Company as it now appears on our records.) 1.

(A Florida Lim	ited Liability Compan	y)	, , , , , , , , , , , , , , , , , , , ,
The Articles of Organization for this Limited Liability Comp Florida document number <u>L25000304984</u>	oany were filed on	JULY 01, 2025	and assigned
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 I	Liability Company," th	e designation "LLC" or the	he 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 off agent and/or the new registered office address here:	Ecc address on ou	r records, enter the	name of the new register
Name of New Registered Agent:			
New Registered Office Address:	Enter	Florida street address	
	, Florida		
	City		a Zip Code
New Registered Agent's Signature, if changing Registered Ag	<u>tent:</u>		

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>	<u>Address</u>	Type of Action
MGR	ALVARO BADELL	EDIF. SEGUROS MERCANTIL, PISO 5	□Add
		AV. LAS ACACIAS C/AV. SOLANO,	■Remove
		- CCS 1-050 VE	□Change
MGR	DANIEL BADELL	EDIF. SEGUROS MERCANTIL, PISO 5	
		AV. LAS ACACIAS C/AV. SOLANO.	■Remove
		- CCS 1-050 VI:	_
MGR	NICOLAS BADELL	3131 NE 188 ST, APT 2609	□Add
		MIAMI, FL 33180	□Remove
			<b>⊟</b> Change
			□Add
			□ Remove
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(If an effective date is I Note: If the date in		ic and cannot be prior not meet the applica			onal) filing.) Pursuant to 605.0207 s date will not be listed as
he record specifies a ord is filed.	delayed effective date, bu	it not an effective ti	me, at 12:01 a.m.	on the earlier of: (b	) The 90th day after the
Dated	AUGUST 11	2025			
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			/ \		
<del></del>	Sinnatura	of a member or	med removemen	e of a member	
<del>-</del>	Signature	of a member or admic	$\mu$	e of a member	_

Filing Fee: \$25.00