

Electronic Filing Menu Corporate Filing Menu

Help

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: ALICE TRAINING INSTITUTE LLC

2. The Florida document number of this limited liability company is: M15000004327

| 3. Jurisdiction of its organization: <u>Nevada</u> | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|-----------------------------|---|
| 4. Date authorized to do business in Florida: 0 | 6/01/2015 | | |
| SECTION II (5-9 complete only the applical | ble changes) | ~ | |
| 5. New name of the limited liability company: | (must contain "Limited Liability Compan | |] |
| (If name unavailable, enter alternate name adopted for the pur- consent of the managers or managing members adopting the a Company, ""L.L.C." or "LLC.") | pose of transacting business in Florida and Itemate name. The alternate name must cor | attach a copy of the writin | |
| 6. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered | stered office address on our reco cred office address here: | rds, enter-the name of | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | Enter Florida Street Addre | · • | |
| | | orida | |
| | Cuy | 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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Signature of the authorized representative

Andrew Ross, Chief Financial Officer

Typed or printed name of signee

Filing Fee: \$25.00

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BARBARA K. CEGAVSKE

Secretary of State

KIMBERLEY PERONDI Deputy Secretary for

Commercial Recordings

STATE OF NEVADA



OFFICE OF THE SECRETARY OF STATE Commercial Recordings Division 202 N. Carson Street Carson City, NV 89701 Telephone (775) 684-5705 Fax (775) 684-7135 North Las Vegas City Hull 2250 Las Vegas Bird North, Suite 400 North Las Vegas, NV 89630 Telephone (702) 486-2886 Fax (702) 486-2885

Certified Copy

W2020021400793 - 410686

02/14/2020 11:48:06 AM

Work Order Number: Reference Number: Through Date: Corporate Name:

20200482477 02/14/2020 11:48:06 AM Navigate360, LLC

The undersigned filing officer hereby certifies that the attached copies are true and exact copies of all requested statements and related subsequent documentation filed with the Secretary of State's Office, Commercial Recordings Division listed on the attached report.

| Document Number | Description | Number of Pages |
|-----------------|----------------------------------------------------|-----------------|
| 20200480580 | Amendment to Articles of Organization - 02/13/2020 | 2 |



Certified By: Electronically Certified Certificate Number: B20200214584490 You may verify this certificate online at <u>http://www.nysos.gov</u> Respectfully.

i hora K. Cegeiste

BARBARA K. CEGAVSKE Nevada Secretary of State

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16144554862 From: James Tanks III

| 00,0 | 2020 02 11 10 1120 001 | | |
|----------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|----------------------------------------------------------|
| • • • • • | | Filed in the Office of | Business Number |
| | | Barbora K. Cegarste | F.0144262013-2 Filing Number |
| | | | 20200480580 |
| BARBARA K. CEGAVSKE | | Secretary of State State Of Nevada | Filed On 2/13/2020 9:58:00 AM Number of Pages 2 |
| | Secretary of Stato 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684-5708 Website: www.nvscs.gov | | |
| Certific | Limited-Liability Comp ertificate of Amendment (PURSUANT TO ate to Accompany Restated Arti Restated Articles (PURSUANT TO | ONRS 86.216, 86.221 and 86.54 | us) ed and |
| TYPE OR PRINT - USE (| DARK INK ONLY - DO NOT HIGHLIGHT | ······································ | |
| 1. Entity information: | Name of entity as on file with the Nevada Secretary of | of State: | |
| | Alice Training Institute LLC | | |
| | Entity or Nevada Business identification Number (NV | 1D): E0144262013-2 | |
| 2. Restated or Restated Articles or Amended and Restated Articles | | | |
| Amended and Restated Articles (Select one): | Articles have been Restated | | |
| (if restating or amending and restating, complete section 1,2 3, 5 and 6.) | X Articles have been Amended and Restate | ed | |
| | * Restated or Amended and Restated articles must be inclu | ided with this filing type. | |
| 3. Type of amendment filing being completed: | Certificate of Amendment to Articles of Organ Company Before Issuance of Member's Interes | ization For a Nevada Lir st (Pursuant to NRS 86.2 | nited-Liability 16) |
| (Select only one box): | The signers thereof are at least two-thirds of the i organizers or the i managers of the limited-liability company | | |
| (If amending, complete section 1, 3, 5 and 6.) | As of the date of the certificate, no member company has been issued. | r's interest in the limited-lie | ability |
| | Certificate of Amendment to Articles of Organ Company (Pursuant to NRS 86,221) | ization For a Nevada Lin | nited-Liability |
| | The limited-liability company is managed b | y 🕅 Managers or 🥅 Men | nbers |
| | The certificate of amendment must be sign if management is not vested in a manager, | ed by a manager of the co by a member. | ompany or, |
| | Amendment to Application for Registration of (Pursuant to NRS Chapter 86) | a Foreign Limited-Liabil | ity Company |
| | Name of Foreign Limited-Liability Company business in Nevada: | If different than registered | to transect |
| | L | | |
| | If amendment is to change the name, the ch The name under which Limited-Liability | | |
| | Foreign Limited-Liability Company name | | |
| | | | |

This form must be accompanied by appropriate fees.

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BARBARA K. CEGAVSKE Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (776) 684-5708 Website; www.nvscs.gov

| C Certific | Limited-Liability ertificate of Amendment (Pu ate to Accompany Restate Restated Articles (Pu | RSUANT TO NRS 86.216, 86.221 & 66.543) d Articles or Amended and | | |
|----------------------------------------|--------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|--|--|
| 4. Effective date and time: (Optional) | Date: | Time: | | |
| 5. Information being changed: | (must not be later than 90 days after the certificate is filed) Changes to takes the following affect: | | | |
| | | (attach additional page(s) if necessary) | | |
| 6. Signature: (Required) | Signature of Manager, Member or Authorized Signar | Chief Executive Officer Title | | |
| | X Signature of Manager, Member or Authorized Signer | Tille | | |
| · · · · · · · · · · · · · · · · · · · | Please include any required or optional in (stach additional page(s) if n | | | |
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This form must be accompanied by appropriate fees.

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CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K, Cegavske, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **Navigate360**, **LLC**, as a DOMESTIC LIMITED-LIABILITY COMPANY (86) duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 03/21/2013, and is in good standing in this state.



Certificate Number: B20200214584444 You may verify this certificate online at http://www.nysos.gov IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 02/14/2020.

Barbora K. Cegarste

BARBARA K. CEGAVSKE Secretary of State

