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	(Requestor's Name)
	(Address)
<u> </u>	(Address)
···· /	(City/State/Zip/Phone #)
PICK-I	JP WAIT MAIL
/ \	(5)
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
	
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COVER LETTER

Virtue Charter Holdings, 1.LC		
virtue Charter riolungs, LLC		
Name of Foreig	ın Limited Liah	pility Company
1adam:		
application, certificate and fee(s)	are submitted	for filing.
		following:
Name of Person		-
ca, P.A.		
Firm/Company		-
d Avenue, Suite 226		
Address		
, Florida 33308		
City/State and Zip Code	 e	-
om		
ress: (to be used for future annual	report notifica	ition)
_	·	467,6711
· · · · · · · · · · · · · · · · · · ·	_ at (_)
Name of Person	Area Code	e & Daytime Telephone Number
ng Address:		Street Address:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
P.O. Box 6327		The Centre of Tallahassee
hassee, Pt. 32314		2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303
osed is a check for the following	amount:	
Fee ☐ \$30 Filing Fee &	□ \$55 Filing	-
Certificate of Status	Certified C	Jopy Certificate of Statu Certified Copy
	application, certificate and fee(s) all correspondence concerning the MINEC OLIVE ca, Esquire Name of Person ca, P.A. Firm/Company d Avenue, Suite 226 Address Florida 33308 City/State and Zip Code om ress: (to be used for future annual formation concerning this matter. ca, Esquire Name of Person g Address: stration Section ion of Corporations Box 6327 hassee, FL 32314 seed is a check for the following Fee	application, certificate and fee(s) are submitted all correspondence concerning this matter to the Hiller OLIVE P.A. Ca, Esquire Name of Person Ca, P.A. Firm/Company d Avenue, Suite 226 Address Florida 33308 City/State and Zip Code om ress: (to be used for future annual report notificated at (an experiment) at (an experiment

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

SECTION	\$1 (1-4 must be completed)	A C
Name of limited liability Company as it appear State: Virtue Charter Holdings, LLC	s on the records of the Florida Departm	U.
Enter new principal office address, if applicable:	775 West 1200 North, Suite 100	SEE, FLORIE
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	Springville, Utah 84663	ORIO A
Enter new mailing address, if applicable:	775 West 1200 North, Suite 100	
(Mailing address MAY BE A POST OFFICE BOX)	Springville, Utah 84663	
 The Florida document number of this limited lia Jurisdiction of its organization: Utah Date authorized to do business in Florida: 4/22 SECTION II (5-9 complete only the applicable New name of the limited liability company: (mus 	/2016	
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L	naging members adopting the alternate	in Florida and attach a name. The alternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office and		the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida Street	
	, Flo	o rida

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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.

tle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action			
1GR 	Angela Hansen	149 E. Pear Street	=			
		Grantsville, UT 84029	Rem			
MGR American Charter Development,lle	American Charter Development, llc	775 West 1200 North, Suite 100	≡ Add			
	Springville, UT 84663					
			□Add			
			TRem			
			= \(\pi\) Add			
						
			=			
aforemention	certificate, if required; no more than 90 and amendment(s), duly authenticated by inder the law of which this entity is orga	the official having custody of records in the	TALLAHASS			

Filing Fee: \$25.00

Typed or printed name of signee