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EXAMINER



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SECRETARY OF STATE
ALLAHASSEFT FINDING

COVER LETTER \					
TO: Registration Section Division of Corporations					
SUBJECT: Mankes & Sussman Tutoring LLC Name of Limited Liability Company					
· · · · · · · · · · · · · · · · · · ·					
The enclosed Articles of Amendment and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Catherine Dussman					
Catherine Sussman Name of Person					
Mankes & Sussman Tutoring LLC Firm/Company					
Firm/Company					
815 NE 171 Terrace					
Address					
N. Manie Beach, FL 33162  City/State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Catherine Sussman at (305) 651-8577  Name of Person Area Code & Daytime Telephone Number					
Name of Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee \$ \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy					

## **MAILING ADDRESS:**

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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## STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ace	It! Tutoring LLC		
( <u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our record a Limited Liability Company)	<u>ls.</u> )	
The Articles of Organization for this Limited Liability Florida document number	• •	oq and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	mited liability company here:		
Mankes & Sussman	· Tutoring LLC		
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Company," the designa	tion "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		<u></u>	
(Principal office address MUST BE A STREET ADD	PRESS)	Ari =	
		22 AR) ASSI	
Enter new mailing address, if applicable:		— <sup>m</sup> o ≥ ∏	
(Mailing address MAY BE A POST OFFICE BOX)			
		TATE ORION	
B. If amending the registered agent and/or registered agent and/or the new registered office ade	stered office address on our records, <u>e</u> dress here:	<del>-</del>	
Name of New Registered Agent:			
New Registered Office Address:			
,	Enter Florida street address		
, 	, Florida		
	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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma MGRM = N	nager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
<del></del>			Add Remove
<del></del>			Add Remove
	<del></del>		Add Remove
		<del></del>	Add Remove
<del></del>			Add Remove
D. If amend	ding any other information, enter change	e(s) here: (Attach additional sheets, if necessary	
_			<u> </u>
	Feb. 17 , 201	1	
Dated	Catherine A		
	Signature of a member Cather	or authorized representative of a member ine Sussman	
	Typed o	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00