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TALLAHASSEE, FLORIDA
TALLAHASSEE

COVER LETTER

	ration Section n of Corporations		
SUBJECT:	LANGUAGEARTSTUDIO LLC	,	
Sebuler,	Name of Limited Liability C		_
The enclosed Ar	ticles of Amendment and fee(s) are submitted for fili	ing.	
Please return all	correspondence concerning this matter to the following	ing:	,
	Diana M. Ramirez Name o	Quintro of Person	
	LAN GUA GE ARTSTUOLO	LLC	
		ompany	
	997 S.W. 137 CT	•	
	Add	lress	
	Miami, FL 331	84	2014
	City/State at	nd Zip Code	
	dianaramir(+VW08 (E-mail address: (to be used for f	Dhotmail.com	ASS - 1
For further infor	E-mail address: (to be used for f mation concerning this matter, please call:	uture annual report notification)	2014 FPR - 1 PM IZ: 33
Diana	Ramiret Quintero at (3	305, 873-3415	: 33
		ea Code Daytime Telephone Numb	per
_	eck for the following amount:		
\$25.00 Filing	Certificate of Status Certifi	ied Copy Certifi nal copy is enclosed) Certifi	Filing Fee, cate of Status & ed Copy nal copy is enclosed)
	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LANGUAGEARTSTUDIO	
(Name of the Limited Liability Company as (A Florida Limited Liabilit	y Company)
The Articles of Organization for this Limited Liability Company were Florida document number <u>L13000173803</u> .	filed on December 17, 2013 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability of	ompany here:
Language Artstudio LLC	
The new name must be distinguishable and end with the words "Limited Liability C	ompany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	20
(Principal office address MUST BE A STREET ADDRESS)	
	2A 70
	00 - 1 PM
Enter new mailing address, if applicable:	mg 👅 III
(Mailing address MAY BE A POST OFFICE BOX)	100 E
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
C	Tity 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = A	Authorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	John J. Quintero	997 S.W. 137 CT	Add
		Miami, FL 33184 UN	a Remove
MGR <u>Diana M. Ramirez</u> Quintero	997 S.W 137 CT	M Add	
	Quillero	Miami, FL 33184	☐ Remove
			C GAdd
			PRemove PR 12:
		7 CI % CI	<u>~</u> 5. □
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100 41 14 15					
The effective date, if one offective date must the date this document that the dated March	ther than the date of the specific, cannot be put is filed by the Florida D	of filing: rior to date of receipt epartment of State)		be more than 90 days	tional) 's after
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Page 3 of 3

Filing Fee: \$25.00