L02000001039

(Requestor's Name)
(Address)
(Address)
(riddioss)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(,,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100271339081

FILED Jun 19, 2015 08:00 AM Secretary of State

DEPARTMENT OF STATE

15 JUN 19 PH 4: 39

JUN 22 2015

R MARON

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 676250 8053666

AUTHORIZATION

COST LIMIT : \$55.00

ORDER DATE: June 19, 2015

ORDER TIME : 3:16 PM

ORDER NO. : 676250-005

CUSTOMER NO: 8053666

DOMESTIC AMENDMENT FILING

NAME: OAK SCHOLAR OF BROWARD, L.L.C.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS:

COVER LETTER

TO:	Registration Sec Division of Corp							
CHRIF		r of Broward, LLC						
SUBJECT: Name of Limited Liability Company								
The enc	losed Articles of	Amendment and fee(s) are subn	nitted for filing.					
Please r	eturn all correspo	ndence concerning this matter t	o the following:					
		Hugo F. Hormazabal						
			Name of Person					
		Oak Scholar of Broward, L	rc .					
			Firm/Company					
		415 Lee Street						
		**************************************	Address					
		Leesburg, FL 34748						
			City/State and Zip Code					
		hugoacademy@yahoo.com	o be used for future annual report notific	wition)				
For furt	her information co	n-man address: (a oncerning this matter, please ca	·	aunny				
	Guerrero, Esq.	3	305 279-1000					
	Name of	l Person	at ()	Felephone Number				
Enclose	ed is a check for th	ne following amount:						
□ \$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 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

FILED Jun 19, 2015 08:00 AM Secretary of State

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OAK SCHOLAR OF BROWARD, L.L.C.
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on February 20, 2015 and assigned Florida document number L02000004039
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 Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Entagency mailing address if annihables
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
(Maning matress MAT BE A POST OFFICE BOA)
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
, Florida
· · · · · · · · · · · · · · · · · · ·
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 cample with the
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to camply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familially with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if the appear is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited the bilitim.

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>	Name	<u>Address</u>	Type of Action
AMBR	HUGO F. HORMAZABAL	415 Lee Street	□ Add
	·	Leesburg, FL 34748	□ Remove
			■ Change
AMBR	GLADYS CALDERON	415 Lee Street	
	•	Leesburg, FL 34748	□ Remove
			■ Change
AMBR	GLADYS HORMAZABAL	415 Lee Street	
		Leesburg, FL 34748	☐ Remove
			☐ Change
AMBR	HUGO M. HORMAZABAL	415 Lee Street	D ∧dd
	·	Leesburg, FL 34748	□ Remove
AMBR	PAMELA HORMAZABAL	415 Lee Street	□ Add
	•	Leesburg, FL 34748	□ Remove ⊡

Oak Scholar of E	Broward, LLC is a	Member-mai	naged compan	Υ.	
					
·					
					
			···· =		
					
				·	 -
tive date, if other than the flective date is listed, the date in this unit's effective date on the	block does not meet the	applicable statutor	ng or more than 90 days y fifing requirement	optional) s after filing.) Pursuant to s, this date will not be	605. liste
cord specifies a delay e 90th day after the re		out not an effec	tive time, at 12:	01 a.m. on the ea	arlie
June 18	2015	·			
	<u>_</u>	Yl	>	ļ	

Page 3 of 3

Filing Fee: \$25.00