

LO2000011117

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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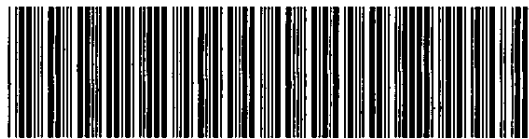
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

N. Collins SEP 12 2008

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: DAS LEARNING SOLUTIONS, 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:

ANDRES GUERRA

(Name of Person)

DAS LEARNING SOLUTIONS, LLC

(Firm/Company)

8180 NW 36 STREET SUITE 319

(Address)

DORAL, FL 33178

(City/State and Zip Code)

For further information concerning this matter, please call:

ANDRES GUERRA

(Name of Person)

at ( 954 ) 6392636

(Area Code & Daytime Telephone Number)

Enclosed is a check for the 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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DAS LEARNING SOLUTIONS, LLC

(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 05/08/2002 and assigned  
Florida document number L02000011117.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

8180 NW 36 STREET SUITE 319

(Principal office address MUST BE A STREET ADDRESS)

DORAL, FL 33178

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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:

ANDRES GUERRA

New Registered Office Address:

8180 NW 36 STREET SUITE 319

*(Enter Florida street address)*

DORAL

*(City)*

, Florida 33178

*(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 = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P	DESSY NIETO	8180 NW 36 STREET SUITE 319 DORAL, FL 33178	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
VP	NELLY CARRERO	8180 NW 36 STREET SUITE 319 DORAL, FL 33178	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	ESTEBAN DARIO PARRA	8180 NW 36 STREET SUITE 319 DORAL, FL 33178	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
P	ANDRES GUERRA	8180 NW 36 STREET SUITE 319 DORAL, FL 33178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
VP	ERIC NOA	8180 NW 36 STREET SUITE 319 DORAL, FL 33178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

NEW PRESIDENT ANDRES GUERRA 8180 NW 36 STREET SUITE 319 DORAL, FL 33178

Dated AUGUST 29, 2008

Signature of a member or authorized representative of a member

ANDRES GUERRA

Typed or printed name of signee

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