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(R	equestor'	s Name)		
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SECRETARY OF STATE
ANASSEF, FLORIDA

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TRANSMITTAL LETTER

TO: Registration S Division of C		· · · · · · · · · · · · · · · · · · ·	
SUBJECT:		hCare and Career Institute, LLC	
	(Name of Lin	nited Liability Company)	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
		A. Christian-Simmons	
	(N	Iame of Person)	
		Institute For Nursing Careers Firm/Company)	
		h Ave W. Building III	
	Palm	(Address) netto, FL 34221	ZU05 JUN SECRETA
For Gode win Gomestic		State and Zip Code)	SSEE 13
	thy A. Christian-Simmons	at: at(941) 685-51	P 4: 28 P STATE F FLORIDA
	(Name of Person)	(Area Code & Daytime	e Telephone Number)
Enclosed is a check for the	te following amount:		
1 \$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)

STREET ADDRESS: Registration Section

Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 _Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Legacy Nursing HealthCare and Career Institute, LLC					
	(Present Name) (A Florida Limited Liability Company)					
FIRST:	The Articles of Organization were filed on					
SECOND:	The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:					
	1) Name Change: Legacy Nursing: Institute For Nursing Careers, LLC TALLAHASSEE, FLORIDA 4: 28					
Dated	Cathy a. Christian Linnus					
	Signature of a member or authorized representative of a member Cathy A. Christian-Simmons Typed or printed name of signee					

Filing Fee: \$25.00