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T. HAMPTON

AUG - 2 2010

**EXAMINER** 

## **COVER LETTER**

	ision of Corporations	
SUBJECT:	EDUCATION ADVANTAGE!, LLC  Name of Limited Liability Company	
	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:	
		,**
	MR. ANTWAN OLIVER, CEO  Name of Person	
_	Name of Person	
	EDUCATION ADVANTAGE ( 11.C.	- <b>-</b> '
	EDUCATION ADVANTAGE! UC Firm/Company	
	1451 W. CYPNETS CHERK RO # 383	
•	Addiess	
	FORT LAU DENOBIE, FL 373 09  City/State and Zip Code	•
	edu. advantage @ yahoo. com  E-mail address: (to be used for future annual report notification)	
For further in	nformation concerning this matter, please call:	
WW4	Name of Person at (954) 663-2027  Area Code & Daytime Telephone Number	
•	Name of Person Area Code & Daytime Telephone Number	
Enclosed is a	a check for the following amount:	
\$25.00 Fil	Certificate of Status Certified Copy Certificate of (additional copy is enclosed) Certified Copy	Status &

### 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



RECEIVED

10 JUL 30 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

July 26, 2010

· 1 - 1

ANTWAN OLIVER 1451 W CYPRESS CREEK RD # 383 FT LAUDERDALE, FL 33309

SUBJECT: EDUCATION ADVANTAGE!, LLC

Ref. Number: L07000023090

We have received your document for EDUCATION ADVANTAGE!, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 110A00017982

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EDUCATION ADV  (Name of the Limited Liability Compa)  (A Florida Limited Liability Compa)	ANTAGE LLC  ny as it now appears on our record iability Company)	SECTION SECTIO	
The Articles of Organization for this Limited Liability Company	were filed on 03 01 20	207 and signed	
Florida document number L0700002309 O.	• •	30 FRY	
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liab	ility company here:	OF STATE OR STATIONS PM 4: 26	
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the designation	ation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	1451 W. CYPRES	S CREEK RD#383	
(Principal office address MUST BE A STREET ADDRESS)	FORT LANDER DAVE		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	1451 W. CYPRES. FORT LANDERDAL		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		enter the name of the new	
Name of New Registered Agent:	•		
,	* *		
New Registered Office Address:	Enter Florida stre	eet address	
Florida			
	City , Flor	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 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 Type of Action Address <u>Title</u> Name BURRIS, TORA 2017 NW46 AVE # 409A MGRM □Add Remove CUMMINGS, GERALD MER ☐ Add Remove Add Remove □Add Remove  $\prod$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2010 Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00