

Aug 25 2008 8:15PM

AIA CORPORATE SERVICES

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Division of Corporations

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Florida Department of State  
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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : CSH SERVICES, LLC  
Account Number : I20070000160  
Phone : (800)494-3124  
Fax Number : (561)455-9885

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TALLAHASSEE, FLORIDA

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**

**EMPOWERMENT TUTORING, LLC**

Certificate of Status	0
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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**EMPOWERMENT TUTORING, LLC**

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company were filed on 01/01/2008

Florida document number L08000001106

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."

**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: \_\_\_\_\_

**610 NW 183rd St Suite 210**

(Enter Florida street address)

**Miami Gardens**

(City)

**Florida 33169**

(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.*

*Andrea Wambs, 8/25/08*  
(If Changing Registered Agent, Signature of New Registered Agent)

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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

Title	Name	Address	Type of Action
MGRM	Sherian Demetrius	52 NW 205 Terr Miami, FL 33169	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input 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.)

The Principal and Mailing Address have changed to:

610 NW 183rd Street, Suite 210      Miami Gardens, FL 33169

MGRM Andrea V Wanze's address has changed to:

610 NW 183rd Street, Suite 210      Miami Gardens, FL 33169

Dated August 25th, 2008

Andrea V Wanze 8/25/08

Signature of a member or authorized representative of a member

Andrea V Wanze

Typed or printed name of signee

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