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J. SAULSBERRY EXAMINER

JAN 1.0 2011

# **COVER LETTER**

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Page + 11: 110		
SUBJECT: rogreso tutoring, LLC  Name of Limited Liability Company		
i-		
The enclosed Articles of Amendment and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
· Winston Malcolm Name of Person		
Progreso to foring, LLC		
Firm/Company		
1612 Carnegie Circle	2011 JA	
Address	JAN-	آهي به معينه هي
Tampa, FL 33619  City/State and Zip Code		
City/State and Zip Code	PM 3:5	1
E-mail address: (to be used for future annual report notification)	2	
For further information concerning this matter, please call:		
Wins fon Malcolm at (8/3) 425-2805  Name of Person Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee U\$30.00 Filing Fee & Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy (additional copy)	atus &	osad)

### 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

Rogreso T	foring. L	LC.			
(Name of the Limited (A	Liability Company as Florida Limited Liabili	it now appears on ou y Company)	ır records.)		
The Articles of Organization for this Limited Li Florida document number	ability Company were	filed on	8/08	_ and assi	gned
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name of	the limited liability o	company here:			
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Li	ability Company," the	e designation "LLC	or the al	obreviation
Enter new principal offices address, if applica	able:				····
(Principal office address MUST BE A STREE	T ADDRESS)		Be	201	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE I	BOX)		Altassee al anima	JIN -7 PH 3: 51	Secretary of the secret
B. If amending the registered agent and/oregistered agent and/or the new registered of		ddress on our rec	cords, enter the	name of	the nev
Name of New Registered Agent:	Winston	Maleolm			
New Registered Office Address:	1612 Car	Negie Cir	iele		<u> </u>
		Litter Fior	tuu sireet uaares		_
	Tampa	,	_, Florida <u> </u>	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

Title	Name	Address	Type of Action
MGR	Lydia Makolm	1612 CARNEGIO CIRLE TAMPA, EL 336/9	□ Add ₽—Remove
<del></del>	·		
<u>,                                      </u>			Add Remove
			Add Remove
			_□ Add _□ Remove —
			□ Add □ Remove
D. If amendin	g any other information, enter change(	s) here: (Attach additional sheets, if necessary.)	201
		56 Same	
Dated	JANUARY 4 , 2001		PK 3: 5
_	JANUARY 4, 2001 Malale Signature of a member of	rauthorized representative of a metaber  Winsfer E. Halcolm  rapinted name of signee	

Page 2 of 2

Filing Fee: \$25.00