

LO9000038930

Jane C Sebastian

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

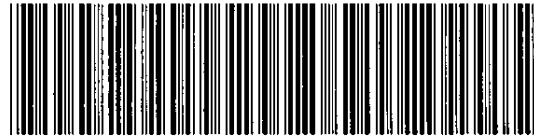
LO9-38930

(Document Number)

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09 SEP 29 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NO. 001220 SEP 29 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 17, 2009

JANE S. SEBASTIAN
4803 CULBREATH ISLES WAY
TAMPA, FL 33629

SUBJECT: AHA TUTORS, LLC
Ref. Number: L09000038930

We have received your document for AHA TUTORS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

I am sending an amendment form please complete that form.

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) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 109A00029132

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ATHA TUTORS, 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:

Marcy Franz
Name of Person

Atha Tutors, LLC
Firm/Company

4803 Culbreath Isles Way
Address

Tampa, FL 33629
City/State and Zip Code

Marcy Franz@athatutors.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Peter Franz
Name of Person

at (813) 222-8002
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)

x Previously
mailed

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

AHA TUTORS, LLC

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

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on April 22, 2009 and assigned
Florida document number Lo9000038930.

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:

(Principal office address MUST BE A STREET ADDRESS)

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:

Peter Frank

New Registered Office Address:

500 N. Westshore Blvd
Suite 450

~~500 N. Westshore Blvd~~
Enter Florida street address

Tampa

City

Florida FL 33609

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.

Peter Frank

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>
MGRM	Jane Sebastian	4803 Culbreath Isles Way Tampa FL 33629	<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

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 SEP 29 AM 10:17

FILED

Dated September 24, 2009

Marcy Frantz
Signature of a member or authorized representative of a member
Marcy Frantz
Typed or printed name of signee