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K. SALY NOV 22 2016

## **COVER LETTER**

TO:	Registration Division of C	
SUBJE	ст:	Re Center for Slow-Parenting Studies UC Name of Limited Liability Company
The end	closed Articles	of Amendment and fee(s) are submitted for filing.
Please	return all corre	pondence concerning this matter to the following:
		Laurie Chachi Starton Name of Person
		The Center for Slow-farenting Studies UC
		632 Millers Dan Ct Address
		Ponte Vedra Beach FL 32082 City/State and Zip Code
		E-mail address: (to be used for future annual report notification)
For fur	ther information	concerning this matter, please call:
	<u>aurie</u> Nan	at (904) L24-9145 e of Person Area Code Daytime Telephone Number
Enclose	ed is a check fo	the following amount:
□ \$2:	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Reg Div P.O	ILING ADDRESS: stration Section sion of Corporations Box 6327 chassee, FL 32314  Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## TO ARTICLES OF ORGANIZATION OF

11/09/09 The Articles of Organization for this Limited Liability Company were filed on Florida document number L09000 107551 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: enter for Slow Teaching The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation 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: New Registered Office Address: Enter Florida street address

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 605, 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

## or removed from our records:

MGR = M $AMBR = A$	lanager uthorized Member		FILED 2016 NOV 21 PM 1: 02	
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			ASSEE, FLORIDA	Remove
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