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Office Use Only



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J. SAULSBERRY EXAMINER APR 3 2013

## **COVER LETTER**

10: Regis

Registration Section
Division of Corporations

SUBJECT: Links To Educational Achievement and Development LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fce(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Hilda N	Name of Person	<del></del>	
	LEAD Colleg	e Prep Consultin	g LLC	
	3956 Tow	n Center Bowleva	rd, Suite 172	
	Orland	City/State and Zip Code	20 IAU	
		be used for future annual report notification	2013 APR -2 SECONE (AR) ALLI ARIASSE	77
	oncerning this matter, please co		T 🚅 🛌	
Hilda M Name of		at (407) 340-431 Area Code & Daytime Te		
Enclosed is a check for th	e 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 enclo	osed)

**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

Links To Educational

The Articles of Organization for this Limited Liability (	Company were filed on 02 25 2010 and assigned
Florida document number <u>L100000 21748</u>	<u> </u>
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	nited liability company here:
LEAD College Prep Con	rsulting LLC ords "Limited Lability Company," the designation "LLC" or the abbreviation
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Lability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	<b>20</b>
(Principal office address MUST BE A STREET ADD	RESS)
	2 2
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	₩ <b>6</b>
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, enter the name of the ned dress here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code
New Pagistared Agent's Signature if changing Pagistare	ad 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 afmending 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 **Address** Type of Action **Title Name** Remove Remove Remove Remove Remove Add Remove

f amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
March 30 . 2013.
M5 Hilde Warie Rivers Signature of a member or authorized representative of a member

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Filing Fee: \$25.00

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