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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON
MAR 1 1 2010
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: Balanced Literacy Squared Educational Services, LLC						
Name of Limited Liability Company						
			•			
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.				
Please return all correspo	ndence concerning this matter	r to the following:				
	Vaughnsha Thompson					
Name of Person						
Balanced Literacy Squared Educational Services						
Firm/Company						
3407 Bretwood Drive						
Address						
Orlando, Florida 32808						
	City/State and Zip Code					
balancedliteracysquared@gmail.com E-mail address: (to be used for future annual report notification)						
		·	cauon)			
For further information co	oncerning this matter, please of	call:				
Vaughnsha Thompson			234-1524			
Name of Person Area Code & Daytime Telephone Nu			e Telephone Number			
• 6.						
Enclosed is a check for th	ne following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Registra Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURI Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 32	n ations nter Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Balance Literacy	/ Squared, Ll	.C `	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appea Liability Company)	<u>rs on our records.</u>)	
The Articles of Organization for this Limited Liability Company	were filed on	2/27/2010	and assigned
Florida document numberL10000022416			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company her	<u>·e</u> :	
Balanced Literacy Squared E	Educational Ser	vices, LLC	
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Compa	nny," the designation "l	LC" or the abbreviation
Enter new principal offices address, if applicable:			<u>ğ.</u>
(Principal office address MUST BE A STREET ADDRESS)			3 SS
			5
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	NO.		. ONS
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, <u>enter t</u>	he name of the nev
	-	•	
Name of New Registered Agent:			
New Registered Office Address:			
	En	ter Florida street add	ress
· .		, Florida	
	City		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 <u>Title</u> <u>Name</u> **Address Type of Action MGRM** Lynette K Nugent ___ Add ☑ Remove 625 Westin Road Lehigh Acres, Fl 33936 \prod Add Remove ☐ Add Remove ☐ Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated March 4. Signature of a member or authorized representative of a member Vaughnsha Thompson

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Typed or printed name of signee

Filing Fee: \$25.00