L12000135056

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DIVISION PRODEROGATION

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# **COVER LETTER**

## TO: Registration Section Division of Corporations

The Start Speaking Training Center, LLC

SUBJECT:

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:

**Michael Williams** 

Name of Person

The Start Speaking Training Center, LLC

Firm/Company

11322 Callaway Pond Drive

Address

Riverview, FL 33579

City/State and Zip Code

msw112867@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

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)

MAILING ADDRESS: Registration Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

# 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

The Start Speaking Training Center, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 10/23/2012 and assigned Florida document number L12000135056

This amendment is submitted to amend the following:

1

# A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		2
	œ	NS:
		- <del>753</del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	29	: : : : : : : : : : : : : : : : : : : :
		-E Ro
		<u>.</u>
		<u>, e</u>

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street o	
	rsuer raonau survei a	IIII III IIII IIII IIII IIII IIII IIII IIII
		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 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

.

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MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Myra S Williams	11322 Callaway Pond Drive	🖸 Add
		Riverview, FL 33579	🖬 Remove
			🗋 Change
			Add
			Remove
			🛙 Change
<u> </u>			Add
			🖸 Remove
			Change
			🗆 Add
		,	Remove
			Change
		·····	🗆 Add
			C Remove
		<u></u>	Change
			🖸 Add
		<u></u>	Remove
			_ Change

' D	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Michael Williams is now a sole Member of The Start Speaking Training Center, LLC. This means he is

the only Registered Agent and Authorized Person.

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

June 26	2018			
12	1			
	Signature of a member or authorized representative of a member			
Michael Williams				
	Typed or printed name of signee			

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Filing Fee: \$25.00