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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:		
Special Instructions to	Filing Officer:	

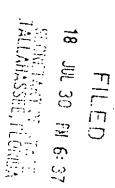




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AUG 0 6 2018 S. YOUNG



COVER LETTER

TO: Registration So Division of Cor				
Teacher N	Next Door, PLLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Sharon Parks			
		Name of Person		
		Firm/Company		
	1102 S. Florida Ave			
	Lakeland, FL 33803			
		City/State and Zip Code		in a ma
	sharon@teachernextdoo			00
For further information of	E-mail address: (concerning this matter, please e	to be used for future annual report notificat all:	1011)	TILED
Sharon Parks		863 709-4744 at ()		LED RESERVED
Name (of Person	Area Code Daytime Te	lephone Number	6: 38 Thire LONDA
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	☑ \$30.00 Fiting Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed:	Certified C	of Status &

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

Teacher Next Door, PLLC			
(Name of the Lim	ited Liability Company (A Florida Limited Lia	as it now appears on our reco bility Company)	ords.)
The Articles of Organization for this Limited I	liability Company w	cre filed on 07-05-13	and assigned
Florida document number L13000095871	.		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liabili	ty company here:	
The new name must be distinguishable and contain the	words "Limited Liability	Company," the designation "I.	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE.	ET ADDRESS)		,
			76 78
Enter new mailing address, if applicable:	-		
(Mailing address MAY BE A POST OFFICE	S BOX)		
			<u></u>
B. If amending the registered agent and registered agent and/or the new registered of		ce address on our reco	rds, enter the name of the new
Name of New Registered Agent:	Sharon Parks		
New Registered Office Address:	1102 S. Florida	Ave	
realistics office radical.		Enter Florida street add	ress
	Lakeland		Florida ³³⁸⁰³
		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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Cheri Aumond-McLean	1102 S Florida Ave.	_ _ Add
		Lakeland, FL 33803	Remove
			☐ Change
MGRM	Sharon Parks	1102 S Florida Ave.	■ Add
		Lakeland, FL 33803	□ Remove
			Change
MGRM	Stephen Parks	1102 S Florida Ave	
		Lakeland, FL 33803	≅ Remove
			☐ Change
			Add TI
			FO-Ghange
			☐ Remove
			Change
			□ Remove

frective date, if other than the date of filing: [In effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as locument's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of The 90th day after the record is filed.	iffective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Puctuant to 605 0207 Sote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as locument's effective date on the Department of State's records. The 90th day after the record is filed.	·						<u></u>		
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Signature of a member or purporized representative of a member			/		/ /	>	-			
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Page 3 of 3

Filing Fee: \$25.00