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(Req	questor's Name)	<u>-</u>
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COVER LETTER

TO:	Registration Se Division of Cor		. *	
SURI	ECT: Ivy Leag	ue Prep, LLC		
	<u></u>	Name of Lim	ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Samuel B. Silvermar		
			Name of Person	
		Ivy League Prep, Ll	_C	
			Firm/Company	
		5500 MILITARY TRA	AIL, SUITE 22-260	
			Address	
		JUPITER, FL 33458		
			City/State and Zip Code	
		sam.silverman@gma	il.com	
		E-mail address: (to be used for future annual report notif	(ication)
For fu	rther information c	oncerning this matter, please c	all:	
Sam	uel B. Silverma	an	_{at (} 561 ₎ 386-5356	
	Name o	f Person		e Telephone Number
Enclo	sed is a check for th	ne following amount:		
☑ \$2	25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 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 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

Ivy League Prep, LLC (Name of the Limited Liability Comp. (A Florida Limited)	pany as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Compan Florida document number L14000050514		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
he new name must be distinguishable and contain the words "Limited Liab	oility Company " the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5500 MILITARY TRAIL	
Principal office address MUST BE A STREET ADDRESS)	SUITE 22-260	
	JUPITER, FL 33458	20
Enter new mailing address, if applicable:	5500 MILITARY TRAIL SUITE 22-260	F-1L 20 DEC -7
Mailing address MAY BE A POST OFFICE BOX)	JUPITER, FL 33458	
3. If amending the registered agent and/or registered or egistered agent and/or the new registered office address he		nter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	aZip 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</u>, <u>name</u>, <u>and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager

$AMBR = \lambda$	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Remove
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record specifies a delayed The 90th day after the reco		e, but not a	n effective tim	e, at 12:01 a.n	n. on the earlier o
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Filing Fee: \$25.00