

L140000 95897

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

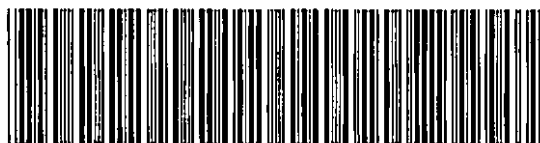
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/25/20--01029--002 ♦♦25.00

2020 OCT 25 PM 2:51

O. SIMMONS

OCT 09 2020

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Behavioral and Mathematics Educational Services, LLC, dba BEMATH, LLC.
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:

Alejandra I Monllau

Name of Person

BEMATH, LLC.

Firm/Company

125 S State Road 7, Suite 104-289

Address

Wellington FL 33414

City/State and Zip Code

bemathtutor@gmail.com / info@bemathtutor.com

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

For further information concerning this matter, please call:

Alejandra I Monllau

786

267-2203

at ()

Name of Person

Area Code

Daytime Telephone Number

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
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

2014 06 13 PM 2:51

Behavioral and Mathematics Educational Services, LLC.

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

The Articles of Organization for this Limited Liability Company were filed on 06 / 13 / 2014 and assigned
Florida document number L14000095897.

This amendment is submitted to amend the following:

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

140 Catania Way

Royal Palm Beach FL

33411-4314

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

125 S State Road 7, Suite 104-289

Wellington FL

33414

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

Name of New Registered Agent:

Same Registered Agent as before (ARIAS TOVAR, ILEANA, ESQ.)

New Registered Office Address:

12781 Miramar Pkwy, Suite #203

Enter Florida street address

Miramar, FL

City

Florida 33027

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:

MGR = Manager
AMBR = Authorized Member

2:14:25 PM 2/25/11

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
President	Andreina Rodriguez	1700 NW North River Dr. Apt. 703	<input type="checkbox"/> Add
		Miami, FL	<input checked="" type="checkbox"/> Remove
		33125-2351	<input type="checkbox"/> Change
President	Alejandra I Monllau	140 Catama Way	<input checked="" type="checkbox"/> Add
		Royal Palm Beach, FL	<input type="checkbox"/> Remove
		33411-4314	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

_____ JAN 27 PM 2:51 _____

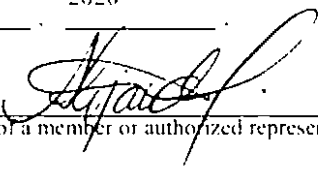
E. Effective date, if other than the date of filing: _____ (optional)

(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.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated August 18th 2020 _____



Signature of a member or authorized representative of a member

Alejandra I Monllau

Typed or printed name of signee

Filing Fee: \$25.00