L1500054188

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COVER LETTER

Division of Corp	porations	
The Peda SUBJECT:	agogue, LLC	
Sobolett.	Name of Limited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.	
Please return all correspon	ndence concerning this matter to the following:	
	Rebecca D. Wooten	
	Name of Person	
	The Pedagogue, LLC	
	Firm/Company	
	12704 McIntosh Rd.	
	Address	
	Thonotosassa, FL	
	City/State and Zip Code	
	rwooten@usf.edu	
	E-mail address: (to be used for future annual report notification)	
For further information co	oncerning this matter, please call:	
Rebecca D. Woote		
Name of		-
Enclosed is a check for the	e following amount:	
□ \$25.00 Filing Fee	■\$30.00 Filing Fee & □\$55.00 Filing Fee & □\$60.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is	tatus &

MAILING ADDRESS:

Registration Section

TO:

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

FILLID

15 APR 10 AM H: 43 SECRETABLY STATE

(A Flori	ida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number <u>L15000054188</u>	Company were filed on March 11, 2015 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the li	mited liability company here:
The new name must be distinguishable and end with 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 ADI	DRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or reg	gistered office address on our records, enter the name of the new
registered agent and/or the new registered office ad	dress here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

The Pedagogue, LLC.

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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member 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	Dana E. Miller	12704 McIntosh Rd.	Add
		Thonotosassa, FL 33952	■ Remove
AMBR	Dana E. Miller	12704 McIntosh Rd.	
		Thonotosassa, FL 33952	■ Remove
		······································	□ Remove
			□ Add
		, 	Remove
			Remove
			□ Add
			□ Remove

<u> </u>	
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ective date, if other than	the date of filing: (option
effective date must be specific	cannot be prior to date of receipt or filed date and cannot be more than 90 days aft
ffective date must be specific	c, cannot be prior to date of receipt or filed date and cannot be more than 90 days aft the Florida Department of State)
effective date must be specifical date this document is filed by the April 8	
effective date must be specific date this document is filed by t	the Florida Department of State)
effective date must be specifical date this document is filed by the April 8	the Florida Department of State)
effective date must be specific date this document is filed by the April 8	the Florida Department of State)
ffective date must be specific ate this document is filed by the April 8	beca Department of State) Signature of a member or authorized representative of a member

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Filing Fee: \$25.00