# 4500079792

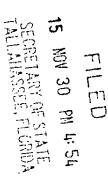
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DEC 01 2015 S. YOUNG

## COVER LETTER

Divisio	on of Corp	porations			
SUBJECT: N	ATIONAL	. EDUCATIONAL DEVELO	PMENT,LLC		
SOBJECT:		Name of Lim	ited Liability Company		
The enclosed A	rticles of A	Amendment and fee(s) are sub-	mitted for filing.		
Please return al	correspor	ndence concerning this matter	to the following:		
		JOSEFRANCO			
			Name of Person		
		NATIONAL EDUCATIO	NAL DEVELOPMENT, LLC		SECR N
			Firm/Company		聖皇
		1820 SW 3RD AVE			#3555E
			Address	_	工公里
		MIAMI, FL 33129			W 30 PM 4: 54 THEY OF STATE THEY SEEL, PLONED
			City/State and Zip Code		
		JOSE.FRANCO@KAYM			
			to be used for future annual repor	rt notification)	
For further info	rmation co	oncerning this matter, please ca	all;		
JOSE FRANC	co		786 46231	42	
	Name of	Person		aytime Telephone Number	
Enclosed is a ch	eck for th	e following amount:			
■ \$25.00 Filin	ng Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	) Certified	te of Status &

TO:

**Registration Section** 

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 ARTICLES OF ORGANIZATION **OF**

NATIONAL EDUCATIONAL DEV	•		
(Name of the Limited	<mark>l Liability Compa</mark> A Florida Limited I	ny as it now appears on our Liability Company)	records.)
The Articles of Organization for this Limited Liability Company were filed on 05/06/2015  Florida document number L15000079792			
This amendment is submitted to amend the follow	ving:		
A. If amending name, <u>enter the new name of</u>	the limited liab	ility company here:	
The new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	1820 SW3RD AVE	
(Principal office address MUST BE A STREET ADDRESS)		MIAMI, FL	
		33129	387 887 887 887 887 887 887 887 887 887
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1820SW3RDAVE	LL STALE STALE STALE STALE
		33129	
B. If amending the registered agent and/o registered agent and/or the new registered offi		<u>e</u> :	ecords, <u>enter the name of the</u>
Naw Pagistared Office Address	1820 SW3RD	) AVE	
New Registered Office Address:		Enter Florida street	t address
	MIAMI		, Florida <u>33129</u>
			. I IVI IUA

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JOSE FRANCO	1820 SW 3RD AVE	■ Add
-		MIAMI, FL	□ Remove
		33129	□ Change
MGR	TAMARA DEVOS	55 NE 6 ST	□ Add
		MIAMI, FL	■ Remove
		33131	
			Change S Condidated T
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			□ Change

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The 90th day after the record is filed.  NOVEMBER 19 2015		Signature of a m	ember or authoriz	ed representative of	f a member			

Page 3 of 3

Filing Fee: \$25.00