

L16000152739

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

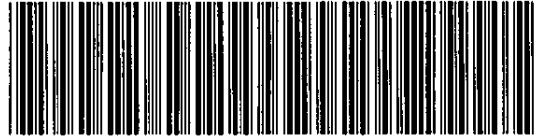
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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FILED
2017 NOV 30 AM 6:40
FALL ARIZONA DISTRICT CLERK

RECEIVED
DEPARTMENT OF REVENUE
17 NOV 30 PM 4:31

DEC 05 2017
J. HARRIS

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 935486 8020289

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : November 30, 2017

ORDER TIME : 1:07 PM

ORDER NO. : 935486-005

CUSTOMER NO: 8020289

DOMESTIC AMENDMENT FILING

NAME: SUMMAEDUCATION LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SUMMAEDUCATION LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

MARTA GARCIA

(Contact Person)

RC LAW LLP

(Firm/Company)

175 SW 7TH ST SUITE 1711

(Address)

MIAMI, FL 33130

(City/State and Zip Code)

For further information concerning this matter, please call:

MARTA GARCIA

(Name of Contact Person)

954 806-3150
at ()

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 1, 2017

CSC
ROXANNE TURNER

SUBJECT: SUMMAEDUCATION LLC
Ref. Number: L16000152739

RESUBMIT

Please give original
submission date as file date

2017 NOV 30 AM 8:40

We have received your document for SUMMAEDUCATION LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please enter a date that the member/manager withdrew/resigned or will withdraw/resign in number 3 of the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 217A00024225

RECEIVED
17 DEC -4 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**
(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: SUMMAEDUCATION LLC
2. The Florida document/registration number assigned to this limited liability company is:
L16000152739
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 9/19/2017
4. I, CAROLINA GIRALDO, hereby withdraw/resign as a
(Print Name of Person Resigning)
VICE-PRESIDENT
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

FILED
2017 NOV 30 AM 8:40
TALLAHASSEE FLORIDA