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| PICK-UP WAIT MAIL |
| (Business Entity Name) |
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| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: Little Genius Academy, 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: |
| Mercedes M. Anderson Name of Person |
| Firm/Company |
| 6330 NW 173 rd Lane |
| Hialeah, Florida 33015 City/State and Zip Code |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Jose G Anderson at (305) 494-2916 Name of Person Area Code Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| S25.00 Filing Fee Certificate of Status S55.00 Filing Fee & Certificate of Status S60.00 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

(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 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Learning Scope Christian Academy LLC
The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address Cin New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comps with the provisions of all statutes relative to the second provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an incomplete performance of my duties, and I am familiar with an incomplete performance of my duties, and I am familiar with an incomplete performance of my duties, and I am familiar with a proper and complete performance of my duties, and I am familiar with a proper and complete performance of my duties, and I am familiar with a proper and complete performance of my duties, and I am familiar with a proper and complete performance of my duties, and I am familiar with a proper and complete performance of my duties, and I am familiar with a proper and complete performance of my duties. 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 = Ma AMBR = At | anager uthorized Memb | er | | |
| <u>Title</u> | <u>Name</u> | | Address | Type of Action |
| MGR | Jose | G Anderson | Hialeah, FL. 33015 | <u>_</u> □ Add |
| | | | Hialeah, FL. 33015 | □ Remove |
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| Tective date, if other than the date of filing: (optional) | |
| 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 | e.) Pursuant to 605.01 |
| ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date ocument's effective date on the Department of State's records. | will not be listed |
| | |
| e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. The 90th day after the record is filed. | on the earlier |
| 7. 10 2 3 | |
| ated JUNUARY 17 2018 | |
| January 19 2018 Lose G. Indensor Signature of a member or authorized representative of a member | _ _ |
| Signature of a member or authorized representative of a member Jose G, Anderson Typed or printed name of signee | & |
| Jose G. Anderson | JAN 30 |
| Typed or printed name of signee | |
| | 70 |

Filing Fee: \$25.00