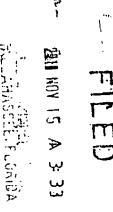
## 117000263971

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## **COVER LETTER**

TO:

Registration Section

Division of Co.	rporations		
Schoolhaus	LLC		
SUBJECT:	Name of Lin	nited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all correspo	ondence concerning this matter	r to the following:	
	Christine Voliva		r 🚉
	Schoolhaus, LLC	Name of Person	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	120 E Marks Street, Suite	Firm/Company 200	15 A
	Orlando, FL 32803	Address	
	christine@schoolhaus.com	City/State and Zip Code	
	E-mail address.	(to be used for future annual report notif	lication)
For further information e	oncerning this matter, please c	call:	
Christine Voliva		813 361-3191 at ()	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	he 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)
Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 issee, FL 32314	STREET/COURT Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, Fl. 32.	n ations nter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Schoolhaus, LLC		
(Name of the Limits	d Liability Company as it now appears on or A Florida Limited Liability Company)	ir records.)
The Articles of Organization for this Limited Li Florida document number 117000263971	·	and assigned
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designa	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applie	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
		S P O
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u></u>	3
B. If amending the registered agent and/ registered agent and/or the new registered of Name of New Registered Agent:	for registered office address on our fice address here:  Christine Voliva (same registered agen	
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida st	reet address
		Florida
	Crty	Florida Zip Code
New Registered Agent's Signature, if changing		
I hereby accept the appointment as registere provisions of all statutes relative to the pro- accept the obligations of my position as reg	ser and complete performance of my o	nuws, ana i am jamuiai wun ana

If Changing Registered Agent, Signature of New Registered Agent

Churtine I believe

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 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>	Name	<u>Address</u>	Type of Action
MGR	Christine Voliva (formerly Christine Roemer)		Add
			Remove
		509 W King Street, Orlando, FL 32804	_ ☐ Change
			Remove
			E Change
			De De Remove
			□ Change
			☐ Remove
			☐ Change
			Add
			Remove
			☐ Change
		-	□ Add
			Remove
			☐ Change

We are updating our registered	d agent/manaing member's l	ast name, which she cha	nged following	į a	
divorce, On our paperwork, C	hristine A. Roemer should r	now read: Christine A. V	oliva.		
A copy of her new driver's lice	ence is included below.			· <del></del>	
					<del></del>
					<del>-</del>
Flo	orida DRIVER	O'	w <u> </u>		- <del></del>
		01-78:511-1	E -		
	VOLTA CHRISTIME AN				
13	ORLANDO, FL	12804-4421 VI 8:55 F SAFE DRIVER			<del></del>
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Effective date, if other than the offective date is listed, the date must	date of filing:	to data of Dianagements	optioi	nal)	605 030
Note: If the date inserted in this blo	ock does not meet the applic	able statutory filing requ			
document's effective date on the De	partment of State's records.				
ne record specifies a delayed	effective date, but no	t an effective time,	at 12:01 a.	m. on th	e earlier o
The 90th day after the reco		·			
Dated November 13	2018			,	
Dated	·	- Church	0 9 14	: / :://e/>/	
		Or wood.			سسه

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00