

L18 0000017200

(Requestor's Name)

(Address)

(Address)

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20 JUN 25 PM 3:20

JUN 30 2020
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COVER LETTER

Registration Section
Division of Corporations

SUBJECT: Myrielle College of Nursing and Public Health.
Name of Limited Liability Company

20 JUN 25 PM 3:28

enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Seth Iesperance

Name of Person

Myrielle College of Nursing.

Firm/Company

6284 Paradise Cove

Address

West Palm Beach, Florida 33411

City/State and Zip Code

sethmd211@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Iesperance 561 302-2467
at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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)

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Myrielle College of Nursing and Public Health LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

20 JUN 25 PM 3: 20

The Articles of Organization for this Limited Liability Company were filed on January 19, 2019 and assigned Florida document number 118000017200.

This amendment is submitted to amend the following:

1. If amending name, enter the new name of the limited liability company here:

Myrielle College of Nursing LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

3175 Congress Ave. Suite 205

Principal office address MUST BE A STREET ADDRESS)

Lake Worth, Florida 33461

Enter new mailing address, if applicable:

6284 Paradise Cove

Mailing address MAY BE A POST OFFICE BOX)

West Palm Beach, Florida 33411

3. 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:

Seth Lesperance

New Registered Office Address:

3175 Congress Ave. Suite 205

Enter Florida street address

Lake Worth

City

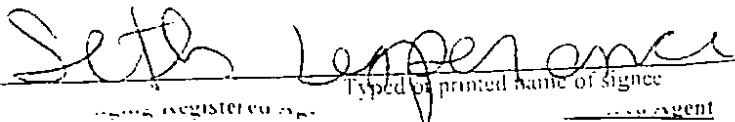
Florida

33461

Zip Code

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

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.

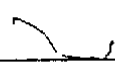


Typed or printed name of signee
Registered Agent

Recommending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MR = Manager

BR = Authorized Member

<u>e</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
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If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

na

Effective date, if other than the date of filing: 12/17/2019 (optional)

If 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.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 6/22/2020

Seth Lempert

Signature of a member or authorized representative of a member

Seth Lempert

Typed or printed name of signee