

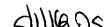
(Rec	questor's Name)			
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(Business Entity Name)				
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04/30/18--01041--011 **25.00





COVER LETTER

TO: Registration Section Division of Corporations		
MINOR ACHIEVEMENTS, L	LLC	
	ne of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Offi	fice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning thi		
1 10000 Total an Correspondence Concerning city	is maker to the following.	部。
ERIC CARSON		SIN THE
Name of Person		केंद्र केंद् केंद्र केंद् केंद् केंद केंद केंद केंद केंद केंद केंद के केंद के केंद के क क क क क क क क क क क क क क क क क क
MINOR ACHIEVEMENTS, LLC		当場で
Firm/Company		
35246 US HWY 19N, #139		.•
Address		
PALM HARBOR, FL 34684		
City/State and Zip Code		
SUPPORT@LESSONPIX.COM		
E-mail address: (to be used for future ann	nual report notification)	
For further information concerning this matter,	, please call:	
ERIC CARSON	727 234-0924	
Name of Person	at () Area Code & Daytime Telephone	e Number
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	
Enclosed is a check for the following	g amount:	
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	

INHS18 (2/14)

. STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	lame of the limited liability company: MINOR ACHIE	EVEMENTS, LLO	<i>-</i>	
2. (a)	MINOR ACHIEVEMENTS	(b) MINOR ACHIEVEMENTS		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	. ,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	113 SOUTH DISSTON AVE	35246 U	S HWY 19N, #139	
	TARPON SPRINGS, FL 34689	PALM H.	ARBOR, FL 34684	
	03/19/2018	L1800007	70485	
 (a 	Date of filing/registration in Florida BERGER, TODD	4.	Document number	
э. (a	Registered Agent and Registered Office shown on the records of the 10225 ULMERTON ROAD	ne Florida Dept. of State	je i 🖼	
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)		
	LARGO	33771	-n 10 Th 1 4 1	
(b)	BILL BINKO		SA CO	
	113 SOUTH DISSTON AVE	<u> </u>		
	NEW Registered Office Address:			
	TARPON SPRINGS , FL	34689		
the ch agent was/w	limited liability company is not organized under the laws ange or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the limited liability.	he registered office bility company, it is the limited liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
	lug (area)	ERIC CARSO		
Signature of a member or authorized representative of a member Printed or typed name of signee 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 stanties 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. Signature of Registered Agent				