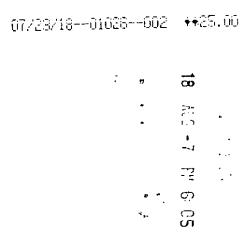
# L18000170801

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### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 31, 2018

BRIAN GREENO PHD 3005 AVALON TERRACE DR VALRICO, FL 33596

SUBJECT: THE LEAGUE FOR SUCCESSFUL SUCCESSFUL STUDENTS, LLC Ref. Number: L18000170801

We have received your document for THE LEAGUE FOR SUCCESSFUL SUCCESSFUL STUDENTS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company in the state of Florida must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." Please add the appropriate designation to the name of your limited liability company or to the alternate name you have selected for the state of Florida, if your name is unavailable in this state. The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable.

Page 2 of 3 is missing.

Please return the corrected original and one copy of 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.

Brittany M Figueroa Regulatory Specialist II Registration/Qualification Section

Letter Number: 818A00015727

## **COVER LETTER**

TO: Registration Section Division of Corpor			
SUBJECT: The	League Ass. S	ouccess ful Successioned Liability Company	SFul Students
The enclosed Articles of Am	endment and fee(s) are sub-	mitted for filing.	
Please return all corresponde	nce concerning this matter t	to the following:	
	Brian	n Greeno, An- Name of Person	<u>D.</u>
		Firm/Company	
	3005 Ava	lon Terrace	Drive
_	Valvico, 1 drgreen	City/State and Zip Code  O Me. Com to be used for future annual report notice	acation)
For further information conc			
Brian G Name of Pe	veen0	at ( <u>813</u> ) <u>732 -</u> Area Code Daytime	- 8173 Telephone Number
Enclosed is a check for the fo	allowing amount:		
\$25.00 Filing Fee I	□ \$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:

A control of

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

The League For Success ful Success ful Students L.L.C.

(Name of the Limited Limbility Company as it now appears on our records.)

(A Florida Limited Limbility Company)

(A Florida Lin	nited Liability Company)	<i>C</i> .,
The Articles of Organization for this Limited Liability Com- Florida document number <u>L 18</u> 00017 08 0 J	pany were filed on 7/16/18	and assigned
This amendment is submitted to amend the following:		
· ·		<u> </u>
The League For Succ	cess ful Students	Lilic.
ne new name must be distinguishable and contain the words "Limited"	Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	\$)	
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX		•
If amending the registered agent and/or registered	d office address on our records, e	nter the name of the
gistered agent and/or the new registered office address	here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	a
	City	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.

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 = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			Add
			☐ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
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			Remove
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	<u> </u>		Add
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Filing Fee: \$25.00