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November 19, 2018

OUTSIDE THE BOX TEACHING LLC KACY WOLFE 11643 FOXGLOVE DR. CLERMONTE, FL 34711

SUBJECT: OUTSIDE THE BOX TEACHING LLC

Ref. Number: L18000237711

We have received your document for OUTSIDE THE BOX TEACHING LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return 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.

Letter Number: 918A00023709

Karen A Saly Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

Division of Corp	orations		
subject: Outs	ide the Box	Teaching LLC ed Liability Company	<u>.                                    </u>
The enclosed Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspor	dence concerning this matter to	o the following:	
	Outside t	he Box Teach	ning LLC
	11643 FOXQ	LOVE Dr. Clerry	ont, FL 34711
	E-mail address: (t	City/State and Zip Code On Code o be used for future annual report notific	notmail.com
For further information e	oncerning this matter, please ca	all:	
Kacyn	101fe	at AOD ) 57	Telephone Number
Enclosed is a check for the	ne 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:

TO:

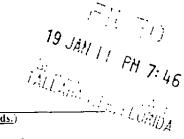
Registration Section

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



Outside the Box Teaching LLC
(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 we Florida document numberL\\$\[ \cdot \cdot 002377\] .  This amendment is submitted to amend the following:	ere filed on OCTOOCE 8th, 2018 and assigned
A. If amending name, enter the new name of the limited liabili	ty company here:
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:	
(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 offi registered agent and/or the new registered office address here:	ce address on our records, <u>enter the name of the ne</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code

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

MGR = Manager AMBR = Authorized Member Type of Action Name 11643 FOXOLOVE Dr. President Kacy Wolfe Clermont, FL, 34711 □ Change President Emma Fraser- 15917 Lake Orienta Ct, and Chojnacki Clermont, FL 3471 ☐ Change Representative Emma Fraser-15917 Lake Orienta X Add Chojnacki ct. Clemont FL397110 Remove \_□ Add Change □ Add ☐ Remove \_□ 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:

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						;
Note: If the o	e, if other than the are is listed, the date must late inserted in this bloffective date on the De	partment of Sta	te's records.	, statutory thing to	,	
the record s o) The 90th	pecifies a delayed day after the reco	effective da ord is filed.	te, but not a	n effective time	e, at 12:01 a	.m. on the earlie
	10th		MAIA			

Page 3 of 3

Filing Fee: \$25.00