1190000 48491

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300330267973

06/21/19--01016--011 **25.00

1

19 JUN 21 PH 4: 3

JUL 0 3 2019 S. YOUNG

COVER LETTER

Division of Co	orporations		
ESLEARI SUBJECT:	NING, LLC	•	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	of Amendment and fee(s) are sub	mitted for filing,	
Please return all corresp	oondence concerning this matter	to the following:	
	Austin R. Payne, Esq.		
		Name of Person	
	Heuston Legal, PLLC		
		Firm/Company	
	1333 Gateway Drive, Suite	: 1024	
		Address	
	Melbourne, Florida 32901		
	emehlich1@gmail.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report not	ification)
For further information	concerning this matter, please co	all:	
Erin Mehlich		321 213-3009 at ()	
Name	of Person	Area Code Daytin	ne 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:

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

ESLEARNING, LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records. Liability Company))	
The Articles of Organization for this Limited Liability Company	were filed on 02/19/2019	and assigned	
florida document number 1.19000048491			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	ces address, if applicable: 1333 Gateway Drive, Suite 1024		
Principal office address MUST BE A STREET ADDRESS)	Melbourne, Florida 32901		
		<u> </u>	
Enter new mailing address, if applicable:	P.O. Box 60246		
Mailing address MAY BE A POST OFFICE BOX)	Palm Bay, Florida 32906	22 E	
		<u> </u>	
 If amending the registered agent and/or registered of registered agent and/or the new registered office address her 	ffice address on our records, <u>e</u> :	enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:		<u> </u>	
	Enter Florida street address		
	Flor	rida Zip Code	
	Only.	ray cinic	

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:

or remove	ea from our recorus:		
MGR =	Manager		
AMBR =	Authorized Member		

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			Change
			□ Remove
			☐ Change
			Add
			☐ Remove
			Change
			Add
			□ Remove
		<u> </u>	Change
			□ Remove
			Change
			Add
			□ Remove
			☐ Change

			···	<u> </u>	
					
	 	 			
			- -		
					
			·	<u> </u>	
<u></u>					
					
Effective date, if other than t	he date of filing: _		, , , , , , , , , , , , , , , , , , ,	(optional)	
If an effective date is listed, the date Note: If the date inserted in this document's effective date on the	block does not meet t	the applicable s	tatutory filing requ	irements, this date wi	Il not be listed
he record specifies a delay The 90th day after the r	ecord is filed.				the earlier
Dated June 19 WWW- 1)19			
1 1	uhla _				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00