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COVER LETTER

TO: Registration Section Division of Corporation (Corporation)					
SUBJECT:	ndependent E	ducational ited Liability Company	2uotujo8	LLC	
The enclosed Articles of Ar	nendment and fee(s) are sub	mitted for filing.			
Please return all correspond	ence concerning this matter	to the following:			
	Jerald	<u>CheeStorouo</u> Name of Person			
		Firm/Company			
	2616 1	Lission Rd Address	APT 179		
	TAllahasse	City/State and Zip Code	32304		
	<u>Jerald Cheesis</u> E-mail address: (1	orough or future annual repo	Cox rt notification)		
For further information con-	cerning this matter, please ca	all:			
Jerold Ch	erson ()	at (<u>504</u>) <u>40</u> Area Code D	24 - 1659 Paytime 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) Certified (of Status &	
Mailing Address: Registration Sec Division of Cor		<u>Street Addre</u> Registratio Division of			
P.O. Box 6327	1	The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Company as it now appears on our records.

(A Florida Limited Liability Company) Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 office address on our records, enter the name of the new registered agent and/or the new registered office address here: Ĭ Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

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>	<u>Name</u>		<u>Address</u>		-	Type of Action
MGR	Jerald	Cheesbooud	1_261Ce	Missian	Rd Apri	_ DAdd
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_	I would like to Change my title
	From "CEO" to "Manager"
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(If an effe	ve date, if other than the date of filing:
he record ord is fil	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 ed.
Dated .	Signature of a member of authorized representative of a member
	Typed or printed name of signee