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Y. SCOTT AUG 13 2023

COVER LETTER

TO:		istration Se ision of Cor					
CUDIE	e de la comp	EXPONEN	PONENTIAL EDUCATION LLC				
SUBJE	.CT:		Name of Lim	ited Liability Company			
The enc	closed	l Anicles of .	Amendment and fee(s) are sub	mitted for filing.			
Please	return	all correspo	ndence concerning this matter	to the following:			
			Michael Klionsky				
			<u> </u>	Name of Person		•	
			Exponential Education LL	С		~ 1	
				Firm/Company		,	
			21481 Town Lakes Drive,	Apt 522	•	(•
				Address	• •)	
			Boca Raton, FL, 33486		, (37)		
			michael.klionsky@gmail.co	City/State and Zip Code	1-21	.2:	
			E-mail address: (to be used for future annual report no	otification)		
For furt	her ir	nformation co	oncerning this matter, please c	all:			
Michae	l Klic	onsky		561 886-8060 at ()			
		Name of	Person	Area Code Dayti	me Telephone Number		
Enclose	ed is a	check for th	e following amount:				
■ \$25	5,00 F	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Sta Copy	atus &
		iling Address		Street Address: Registration S	ection		
	Div	ision of C	orporations	Division of Co	orporations		atus &
). Box 632		The Centre of		10	
	l al	lahassee, F	L 32314	2415 N. Monr	oe Street, Suite 8	Filing Fec. cate of Status & ed Copy is enclosed)	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EXPONENTIAL EDUCATION LLC	
(Name of the Limited Liability Company as it now (A Florida Limited Liability Con	appears on our records.) apany)
The Articles of Organization for this Limited Liability Company were filed Florida document number L19000206791	on 08/14/2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability comp	any here:
LION TUTORING LLC	
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:	2 5 3
Principal office address MUST BE A STREET ADDRESS)	
The part of the same of the sa	
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
3. If amending the registered agent and/or registered office address on gent and/or the new registered office address here:	our records, enter the name of the new regist
Name of New Registered Agent:	
New Registered Office Address:	nter Florida street address
Uin	Florida Zin 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>	<u>Name</u>	Address	Type of Action
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			□Remove
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record specifies a delayed effective is filed.	date, but not an effective	time, at 12:01 a.m. on	the earlier of: (b)	The 90th da	ay after the
	2023				
June 27	·				
ated June 27 Michael Kl	Consky	norgad penesentative of	a member		