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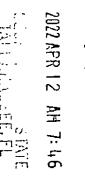
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	Name of Lim	ited Liability Company	
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сопсарона	ence concerning this matter	to the following.	
	Evan Elias		
		Name of Person	
	REJOLT LLC		
		Firm/Company	
	9780 NW 62 Place		
		Address	
	Parkland, FL 33076		
		City/State and Zip Code	
	EvanElias001@gmail.com		
		·	fication)
mation con	cerning this matter, please ca	all;	
		954 328-0007	
Name of P	erson		e Telephone Number
ck for the	following amount:		
g Fee	□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status
t c	icles of Arcorrespond	Evan Elias Parkland, FL 33076 Evan Elias Parkland, FL 33076 Evan Elias Parkland FL 33076	Name of Limited Liability Company dicles of Amendment and fee(s) are submitted for filing. correspondence concerning this matter to the following: Evan Elias Name of Person REJOLT LLC Firm/Company 9780 NW 62 Place Address Parkland, FL 33076 City/State and Zip Code EvanElias001@gmail.com E-mail address: (to be used for future annual report notination concerning this matter, please call: Name of Person Name of Person Name of Person Daytim

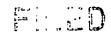
TO:

Registration Section

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2022 APR 12 AM 7: 46 REJOLT LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) TALLIMA SSEE, FL The Articles of Organization for this Limited Liability Company were filed on $\frac{08/19/2019}{1}$ and assigned Florida document number L19000210251 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: LEARN FRENCH WITH CLEMENCE LLC 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida

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 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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