L200000009950

<u> </u>	(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:
FILED STORE TARY OF STATE 1023 JUL 18 AM 9: 29	J DENNIS
YCCRETAI	JUL 1 9 2023
22	

Office Use Only



800412441488

07/19/29--01001--017 **25.00

2023 JLL 18 PH 4: 25

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TEACHING AIDS, LLC		
(Name of the Limited Liability Compa (A Florida Limited)	hability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.20000008950}{1.00000000000000000000000000000000000$	were filed on 01/08/2020	and assigned
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 I	the abbreviation "L.L.C."
	260 1st Ave. S	
Enter new principal offices address, if applicable:	#200-130	2873
(Principal office address MUST BE A STREET ADDRESS)	St. Petersburg, FL 33701	
		8 32
Enter new mailing address, if applicable:	260 1st Ave. S	E SP
(Mailing address MAY BE A POST OFFICE BOX)	#200-130	- - 2 まい
	St. Petersburg, FL 33701	7 55
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Florid	a Zip Code
New Registered Agent's Signature, if changing Registered Agent:	·	·
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ee to act in this capacity. I furthe performance of my duties, and I provided for in Chapter 605, F.S.	am familiar with and Or, if this document is
Ff Chai	nging Registered Agent, <u>Signature of Ne</u>	w 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
			□Remove
			□Add
			□Remove
			□Change
			
			□Remove
			□Change
			🗀 Add
			Remove
			Change
			Remove
			Change
		<u> </u>	
			□Remove
			□ Change

		<u> </u>	
			
	·		
		-	
	· · · · · · · · · · · · · · · · · · ·	<u>-</u>	·
		_	
			
			
<u> </u>			
			
		· ·-	
ective date, if other than the date in effective date is listed, the date must be: If the date inserted in this block turnent's effective date on the Department.	e specific and cannot be prior to t k does not meet the applicabl	date of thing or more than 90 day	(optional) is after filing.) Pursuant to 605,020 is, this date will not be listed a
•			
	late, but not an effective time	at 12:01 a.m. on the earlier	of: (b) The 90th day after th
	date, but not an effective time	e, at 12:01 a.m. on the earlier	of: (b) The 90th day after th
s filed.		e, at 12:01 a.m. on the earlier	of: (b) The 90th day after th
s filed.		e, at 12:01 a.m. on the earlier	of; (b) The 90th day after th
s filed.			of; (b) The 90th day after th
ecord specifies a delayed effective of stilled. Italy 18 Kingslay Cha			of; (b) The 90th day after th

Filing Fee: \$25.00