# 20000120961

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### APR 15 2021



# FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

4/12/21

NAME: INVENIO LEARNING LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE



### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 13, 2021

FLORIDA FILING & SEARCH SERVICES, INC.

SUBJECT: INVENIO LEARNING LLC

Ref. Number: L20000120961

We have received your document for INVENIO LEARNING LLC and the authorization to debit your account in the amount of \$. However, the document has not been filed and is being returned for the following:

Page 2 missing

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker Regulatory Specialist III

Letter Number: 321A00007547

Inanks!

www.sunbiz.org

Please Keep original file date

### **COVER LETTER**

		istration Sec sion of Corp				
SUBJEC	<b>~г.</b>	Invenio Lea	rming LLC			
SUBJEC	CI;		Name of Lim	ited Liability Company		<del></del>
The encl	losed	Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn	ali correspo	ndence concerning this matter	to the following:		
			Devon Falco			
				Name of Person	··· <u>-</u> · · · · · ·	<del></del>
			Invenio Learning			
				Firm/Company	_	
			PO Box 741			
				Address		<del></del>
			Loxahatchee FL 33470			
			foloadayon@amail.com	City/State and Zip Code	:	<del>-</del>
			falcodevon@gmail.com E-mail address: (	to be used for future annua	report notifica	tion)
For furth	ner in	formation co	oncerning this matter, please c	all:		
Devon F	Falco	•		561 4: at ()	30-7663	
		Name of	f Person	Area Code	Daytime T	elephone Number
Enclosed	d is a	check for th	e following amount:			
□ <b>\$2</b> 5.	.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is en		□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Reg Div P.O	ling Addressifistration Sistemation of Color Box 632 lahassee, F	ection orporations 7	Divisio The Ce 2415 N	ration Section of Corporate of Tall	rations lahassee Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Invenio Learning LLC			··-							
(Name of the Limited Liability (A Florida	y Company as it now appears on o Limited Liability Company)	ur records.)								
The Articles of Organization for this Limited Liability Co	ompany were filed on $\frac{05/05/20}{1}$	)20	and assigned							
	<b>-</b>									
This amendment is submitted to amend the following:										
A. If amending name, enter the new name of the limit	ted liability company here:									
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designa	tion "LLC" or the abbre	viation "L.L.C."							
Enter new principal offices address, if applicable:										
(Principal office address MUST BE A STREET ADDR	ESS)									
Establica address if amplicables										
Enter new mailing address, if applicable:										
(Mailing address MAY BE A POST OFFICE BOX)	· · · · ·		107							
		** **** ****								
B. If amending the registered agent and/or registered	l office address on our recor	ds, enter the name o	f the new register							
agent and/or the new registered office address here:		33	( n.) (							
		SEC.								
Name of New Registered Agent:		<u>্</u> তি কৈ	<u> 72                                   </u>							
New Registered Office Address:			ւ 2							
	Enter Florida st	reet address								
		, Florida								
	City		Zip 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Ma $AMBR = Au$	nager thorized Member NO	Change DK	
<u>Title</u>	<u>Name</u>	Address	Type of Action
	· · · · · · · · · · · · · · · · · · ·		□Add
			□Remove
			□Change
			□Add
			□Remove
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<del></del>			□Add
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			□Remove
			□Change

a - g	and, its managers and or members had transacted business on behalf of the entity, made payments on behalf and accepted receipts for the entity, and on November 6, 2019 drafted and signed an operating greement upon which date the members advanced funds for Florida operation and a
a - g	
g	greement upon which date the members advanced funds for Florida operation and a
_	
it	reed to transfer all property of Cottage by the Pond and Estate Logistics LLC to Invenio Learning LLC,
	is resolved and adopted that Invenio Learning LLC will adopt an effective date for
0	perations of November 6, 2019.
_	
_	
_	
_	
reffec <u>te:</u> If	e date, if other than the date of filing:
cord . s filed	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 i.
ed	4-12-21
	1100000

Filing Fee: \$25.00