## KZC CCC 235356

(F	Requestor's Name)
(A	address)
(A	address)
(0	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(0	Occument Number)
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1A. 2/22/21



## **COVER LETTER**

TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

THE LEARNING POD LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: NAYELA GIGA Name of Person Firm/Company 17351 SW 35TH STREET Address MIRAMAR, FLORIDA 33029 City/State and Zip Code NAYELA786@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 5759810 NAYELA GIGA Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ■ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE LEARNING POD, LIC		<del> </del>	
( <u>Name of the Limi</u>	(A Florida Limited	ny as it now appears on our Liability Company)	<u>records.</u> )
The Articles of Organization for this Limited L. Plorida document number L20000238236	iability Company	were filed on 08/06/2020	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	oility company here:	
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		12555 ORANGE DR.	
Principal office address MUST BE A STREET ADDRESS)		SUITE 4180	
		DAVIE, FL 33330	20:
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		12555 ORANGE DR. SUITE 4180	TJAN 19
		DAVIE, FL 33330	
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our records,	enter the name of the new regist
Name of New Registered Agent:	ADITI SHAH		
New Registered Office Address:	12555 ORANG	GE DR. STE 4180  Enter Florida street	t address
	DAVIE	Line/ 1 Wind Sires	. Florida <sup>33330</sup>
		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 Changing Registered Agent, Signature of New Registered Agent

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

|GR = Manager | MBR = Authorized Member

<u>itle</u>	<u>Name</u>	<u>Address</u>	Type of Action
1GR	NAYELA GIGA	4222 SW 141 AVENUE	🗆 Add
		DAVIE, FLORIDA 33330	■Remove
			Change
			□Add
			□Remove
		<del>.</del>	Change
			□Add
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te: If the date	if other than the is listed, the date muse inserted in this bective date on the I	ust be specific block does no	and cannot be at meet the	e prior to date o applicable sta	of filing or more	than 90 days a		
cord specific s filed.	s a delayed effecti	ve date, but i	not an effec	tive time, at	12:01 a.m. on	the earlier of	(b) The 90s	h day after the
ed JANC	LARY "	8	<u>20</u> .	<u>21                                    </u>				
	<del>-</del>	Signature of	f a member o	authorized m	presentative of	a member		
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