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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062
Phone : (323)962-8600
Fax Number : (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Fmail	Address:	

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WE THE PEOPLE EDUCATIONAL SERVICES LLC.

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Certificate of Status	0
Certified Copy	1
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COVER LETTER

	Registration Sec Division of Corp		٠,			
		EOPLE EDUCATIONAL SERV	VICES LLC			
SEBJEC	T:	Name of Limite	ed Liability Company			
The enclo	sed Articles of a	Amendment and fee(s) are subm	itted for filing			
Please ret	um all correspo	ndence concerning this matter to	the following:			
		Cheyenne Moseley				
		The second section of the second seco	Name of Person			
		Legalzoom.com, Inc.				
	Firm/Company 101 N Brand Blvd 11th Fl					
		101 N Brand Blvd 11th Fl				
			Address			
		Glendale, CA 91203				
			City/State and Zip Code			
		mpg2049@gmail.com				
		E-mail addiess: (to	be used for future annual report not	dication)		
For furth	er information c	oncerning this matter, please cal	II·			
Cheyenn	ie Moseley		800 773-0888 at ()			
	Name o	l Person	Area Code Daytin	ne Telephone Number		
Enclosed	is a check for th	ne following autount:				
\$25.0	00 Filing Fee	□ \$30 00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

From: Arranda Sando

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)			
The Articles of Organization for this Limited Liability Company were filed on $\frac{69/08/2020}{}$		_ and as	signed
Florida document number 1.20000278831			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company here:			
We The People Educational Services and More LLC			
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or	the abbre	eviation *1.	.L.C "
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)	<u></u>		
B. If amending the registered agent and/or registered office address on our records,			- 6 Ab - 11 ara
B. If amending the registered agent and/or registered office address on our records, registered agent and/or the new registered office address here:	inter tr	ie name	or the new
represent audior the new registered once address need.	•		
		ယ	~*,
Name of New Registered Agent:		22	
New Registered Office Address:	٠.	745	·, ·
New Negisteren Ornee yuuress. Enter Florida street address	1.	- 0t	
, Flori	da		
City		Zip Cock	,

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

Te: 18506176383

2021-01-16 09:24:41 PST

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 = M AMBR = A	lanager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Add
			☐ Remove
			☐ Change
			☐ Remove
			□ Change
			☐ Remove
			☐ Change
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			Change
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	•		☐ Change
			□ Add
			□ Remove
			☐ Change

From, Amanda Sando

2021-01-16 09:24.41 PST

m .	(antional)
e e	tive date, if other than the date of filing: (optional) Hective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 505,0201 If the date inserted in this bluck does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
e re Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o e 90th day after the record is filed.
ate	1 JANUARY ST. 2021
	Michael R Peres Signature of a member or authorized representative of a member
	Michael R Perez

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Filing Fee: \$25.00