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COVER LETTER

TO:	Registration Sec Division of Corp	tion orations		·	
Sub ir		CENTER OHARE L.L.C.		•	e .
SUBJEC	· L ;	Name of Lim	ited Liability Company		
The enclo	osed Articles of A	amendment and fee(s) are sub-	mitted for filing.		
Please ret	turn all correspon	dence concerning this matter	to the following:		
		Cheyenne Moseley			
			Name of Person		
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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section

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

To: 18506176383

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2021-05-19 12:42:09 PDT

LEARNING CENTER OHARE L.L.C.			•
(Name of the Limited Liabilin (A Florida	y Company as it now appears Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Co Florida document number <u>L21000171301</u>	ompany were filed on 04/	13/2021	and assigned
This amendment is submitted to amend the following:	 	<i>;</i>	÷.
A. If amending name, enter the new name of the limit	ted liability company her	<u>re</u> :	
Guided Instruction, L.L.C.		•	202 SE
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the de	signation "LLC" or the	abbreviation L.L.C.
Enter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·		9
(Principal office address MUST BE A STREET ADDR	<u>ESS)</u>		SEE SI
Enter new mailing address, if applicable:			50 FATE
(Mailing address MAY BE A POST OFFICE BOX)		,	
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr	tered office address on ress here:	our records, ent	er the name of the nev
Name of New Registered Agent:			
New Registered Office Address:	Enter Flori	ida street address	
	5.4 · · · · · ·	, 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 Changing Registered Agent, Signature of New Registered Agent

To: 18506176383 • Page: 5 of 6

2021-05-19 12:42:09 PDT

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From: Janet Koh

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>	Name Denise O'Hare	Address 12508 SILVERDALE ST.	Type of Action
AMBR	Denise O nate	TAMPA, FL 33626	\Baracter Add
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MGR	Learning C Ohar		
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Danise C	Signature of a member or authorize	ed representative of a mem	ber			
Denise O'Hare	Signature of a member or authoriz	ed representative of a mem	ber			

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