# 121000179159

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:
Type or Action

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EGRETARY OF STATE

A. BUTLER
JUN 2 0 2022

		COVER LETTE	R	
TO: Registration Sc				
Division of Cor	porations			
TAMPA E	NGLISH CENTER "LLC"			
SUBJECT:	Name of Limited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Maclainine Saadi			
		Name of Person	<del> </del>	
	Tampa English Center "LI	.C"		
	<del></del>	Firm/Company		
	1419 latta Drive, # 103			
		Address		
	Celebration FL 34747			
	<del></del>	City/State and Zip Code		
	Maelainine.Saadi@gmail.co			
	E-mail address: (	to be used for future annual	report notification)	
For further information c	oncerning this matter, please co	all:		
Maelainine Saadi		407 43. at ( )	2 9301	
Name o	f Person	Area Code	Daytime Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee Certified Copy (additional copy is end	Certificate of S	
Mailing Addres		Street A		
Registration Section		Registration Section		
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

2022 JUN 14 AM 8: 24

TAMPA ENGLISH CENTER "LLC"

SHICENTER "LLC"

SECRETARY OF STATE

(Name of the Limited Liability Company as it now appears on our records.) ALLAHASSEF, El

	(A Florida Limited	Liability Company)		
The Articles of Organization for this Limited L	iability Company	were filed on 04/1	9/2021 and assigned	
Florida document number L21000179159				
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company her	<b>:</b>	
Celebration English Center "LLC"				
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the des	gnation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		1419 latta Drive		
(Principal office address MUST BE A STREE	T ADDRESS)	# 103 ,		
		Celebration FL 34	747	
Enter new mailing address, if applicable:		1419 latta Drive		
(Mailing address MAY BE A POST OFFICE	BOX)	# 103		
		Celebration FL 34747		
B. If amending the registered agent and/or ragent and/or the new registered office address  Name of New Registered Agent:	egistered office as here:  Maclainine Saa		ords, enter the name of the new registered	
N. B. Jog.	1419 latta Drive	. # 103		
New Registered Office Address:	- Try latta Diffe	·	street address	
	Celebration	City	, Florida 34747 Zip Code	
New Registered Agent's Signature, if changing F	Registered Agent:	J.,	гір Соце	
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registering filed to merely reflect a change in the recompany has been notified in writing of this company has	d agent and agre er and complete stered agent as p registered office	performance of m provided for in Che	oduties, and I am familiar with and support 605. F.S. Or, if this document is	

If Changing Registered Agent, Signature of New 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
MGR	Maclainine Saadi	1419 Latta drive	Add
		# 103	□Remove
		Celebration FL 34747	☐ Change
			□ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			Change
	<del></del>		□Add
			Remove
			Change
			□Add
			Remove
			□Change

	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del> </del>	
<del></del> -	
Effective	date, if other than the date of filing: (optional) e 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 605.0207 (
Note: If the	e 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 605.0207 ( he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t
document'	s effective date on the Department of State's records.
e record sp	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
rd is filed.	$\gamma$
4/6/	2022
Dated	
	:1//
	Signature of member or authorized representative of a member
	Maelainine Saadi
	Typed or printed name of signee

Filing Fee: \$25.00



### RECEIVED

2022 JUN 14 AM 9: 32

#### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 24, 2022

MAELAININE SAADI 1419 LATTA DRIVE #103 CELEBRATION, FL 34747

SUBJECT: TAMPA ENGLISH CENTER "LLC"

Ref. Number: L21000179159

We have received your document for TAMPA ENGLISH CENTER "LLC" and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

YOU DID NOT CHECK A TYPE OF ACTION FOR YOUR AUTHORIZED MEMBER.

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.

Letter Number: 222A00011749

Anissa Butler Regulatory Specialist II

www.sunbiz.org



2022 MAY 16 PM 2: 16

## FLORIDA DEPARTMENT OF STATE ECALIANCE, STATE Division of Corporations TALLAHASSEE, FL

April 29, 2022

MAELAININE SAADI 1419 LATTA DRIVE, #103 CELEBRATION, FL 34747

SUBJECT: TAMPA ENGLISH CENTER "LLC"

Ref. Number: L21000179159

We have received your document for TAMPA ENGLISH CENTER "LLC" and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Anissa Butler Regulatory Specialist II

www.sunbiz.org

DO DOV 0007 M U 1 DU 11 000

Letter Number: 922A00010024