L21000250740



100412942641

07/28/23--01019--019 **60.00



Office Use Only

A. RIVERS SEP 2 1 2023

COVER LETTER

SUBJECT: Name of Limited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Christine Luzuriaga					
		Name of Person				
	Affluent Learning PLLC					
-,		Firm/Company				
	2045 Nottingham Drive					
	,	Address	· · · · · · · · · · · · · · · · · · ·			
	Winter Park, FL 32792					
		City/State and Zip Code	·			
	Therapist.ChristineL@gma					
		to be used for future annual report noti	fication)			
ror further information c	oncerning this matter, please c	all:				
William A. Vega		786 447-9965 at ()				
Name o	f Person		e 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 enclosed)	\$60.00 Fiting Fee, Certificate of Status & Certified Copy (additional copy is enclosed			

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tailahassee, FL 32314

TO:

Registration Section

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AFFLUENT LEARNING PLLC				
(Name of the Limi	ted Liability Compa (A Florida Limited I	ny as it now appears on our i Liability Company)	records.)	
The Articles of Organization for this Limited I	Liability Company	were filed on 05/28/2021		and assigned
Florida document number L21000250740				_
This amendment is submitted to amend the foll	lowing:			
A. If amending name, enter the new name o	of the limited liab	ility company here:		
AFFLUENT LEARNING CENTER PLLC				
The new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the designation	"LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if appli-	60 S Semoran Boulevard	1		
Principal office address MUST BE A STREI	Orlando, FL 32807			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2045 Nottingham Drive Winter Park, FL 32792		
B. If amending the registered agent and/or agent and/or the new registered office address.	registered office : ess bere:	address on our records, g	enter the name	of the new regist
Name of New Registered Agent:	William A. Ver	ga		2
New Registered Office Address:	2045 Nottingha	anı Drive		
		Enter Florida street	address	7:
	Winter Park		_, Florida <u>3279</u>	7: 53
		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

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	William A. Vega	2045 Nottingham Drive, Winter Park, FL 32792	= Add
			□Remove
		 .	□ Change
			□Add
			□Remove
			Change
			□Add
•	u		□Remove
		·	□ Change
			□Add
	·		Remove
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Note: If	e date, if other than the live date is listed, the date mus the date inserted in this blacks seffective date on the Decrease.	ock does not me	et the applicab	date of filing or mo le statutory filing	(option than 90 days after grequirements, this	onal) filing.) Pursuant to 605 date will not be list	5.0207 (ed as t
	specifies a delayed effectiv	e date, but not a	n effective time	e, at 12:01 a.m. o	n the earlier of: (b)	The 90th day afte	r the
e record rd is filed							
rd is filed Si	eptember 20		2023				
rd is filed Si	eptember 20	f LUTAUNIA	2023				
ord is filed	eptember 20 Christia	wywa Signature of a me	ga	zed representative	of a member		

Filing Fee: \$25.00



August 23, 2023

CHRISTINE LUZURIAGA 2045 NOTTINGHAM DRIVE WINTER PARK, FL 32792

SUBJECT: AFFLUENT LEARNING PLLC

Ref. Number: L21000250740

We have received your document for AFFLUENT LEARNING PLLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6353.

Alecia Rivers Regulatory Specialist III

www.sunbiz.org

Letter Number: 023A00019633