# LZ1000376719

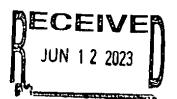
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| Special Instructions to Filing Officer. |
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## **COVER LETTER**

TO:

| TO: Registration Se<br>Division of Cor |  |   |  |  |  |
|--|--|---|--|--|--|
| FIRST STE                              | PS EDUCATION ST PETER!                       | SBURG LLC   |  |  |  |
| SUBJECT:                               | Name of Lim                                  | ited Liability Company  | <del></del>  |  |  |
| The enclosed Articles of               | Amendment and fee(s) are sub                 | mitted for filing.  |  |  |  |
| Please return all correspo             | ondence concerning this matter               | to the following:   |  |  |  |
|  | CESAR NUNEZ                                  |   |  |  |  |
|  |  | Name of Person  |  |  |  |
|  |  | Firm/Company  |  |  |  |
|  | 530 31ST ST SOUTH                            |   |  |  |  |
|  |  | Address   | · · · · · · · · · · · · · · · · · · ·  |  |  |
|  | ST. PETERSBURG, FL 33                        | 3712  |  |  |  |
|  | CESAR@FIRSTSTEPSED                           | City/State and Zip Code UCATION.COM to be used for future annual report not | itication)   |  |  |
| For further information c              | oncerning this matter, please c              | ·   | incarion,  |  |  |
| STEVE TRAN                             |  | 727 536-4911  |  |  |  |
| Name o                                 | f Person                                     | Area Code Daytin  | ne 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 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |  |  |
| Mailing Address Registration S         | Section                                      | Street Address:<br>Registration Se  |  |  |  |
| Division of Corporations P.O. Box 6327 |  | Division of Corporations The Centre of Tallahassee                          |  |  |  |
| Tallahassee, l                         | FL 32314                                     |   | pe Street, Suite 810   |  |  |

Tallahassee, FL 32303

eXL Legal, PLLC

12425 28th Street N., Ste 200 St. Petersburg, FL 33716 (727) 536-4911

June 2, 2023

Registration Section Division of Corporations P.O Box 6327 Tallahassee, Florida 32314

RE: Amendment Filing-First Steps Education St Petersburg LLC

To Whom It May Concern:

Please find enclosed a Cover Letter and Amendment Filing for the above reference matter, along with a filing fee for \$25.00.

Please contact the undersigned with any questions or concerns.

Sincerely,

/s/ Steve D. Tran, Esq.

Enclosures Cover Letter Amendment Form Check No 65768

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

### FIRST STEPS EDUCATION ST PETERSBURG LLC

2023 JUN 12 AM 8: 44

(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 08/23/2021 and assigned Florida document number L21000376719 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

#### 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.

City

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          | MARTHA CANAL MURCIA | 530 31ST STREET SOUTH   | <b>■</b> Add   |
|              |                     | ST PETERSBURG, FL 33712 | □Remove        |
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| fective date, if other than th   | e date of filing:                        |                      |                   | (0                | ntional)               |               |
| fective date, if other than the un effective date is listed, the date mu | ust be specific and ca                   | nnot be prior to     | date of filing or | more than 90 days | after filing.) Pursuar | t to 605.0207 |
| ote: If the date inserted in this becament's effective date on the I     | Diock does not med<br>Department of Star | et the applications. | ole statutory fil | ing requirements. | this date will not     | be listed as  |
|  |  |                      |                   |                   |                        |               |
| ecord specifies a delayed effecti<br>is filed.                           | ve date, but not ar                      | effective tim        | ie, at 12:01 a.m  | on the earlier o  | f: (b) The 90th d      | ay after the  |
| ited   | ,  | 2023                 |                   |                   |                        |               |
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|  |  |                      | <u> </u>          | _/~               | <del>_`</del> _        |               |
| <del>-</del>   | Signature of a me                        | mber or author       |                   |                   | <del>`</del><br>-      |               |