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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

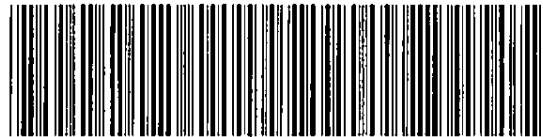
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/20/24--01029--015 **25.00

2024 AUG 20 AM 11:57
SECRETARY OF STATE
TALLAHASSEE, FL
171-110

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: UBIQ EDUCATION LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kelly Brill

Name of Person

ExportAction

Firm/Company

4600 140th Ave North, Suite 180

Address

Clearwater, FL 33762

City/State and Zip Code

kellyb@exportactionusa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kelly Brill

727

538-4147

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECRETARY OF STATE
TALLAHASSEE, FL 32303

2024 AUG 20 AM 11:57

1711 3770

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

UBIQ EDUCATION LLC

(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 04/01/2022 and assigned
Florida document number L22000158823.

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:

4600 140th Ave N STE 180

Enter Florida street address

CLEARWATER

City

, Florida 33762

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

1. Attaching 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>	<u>Address</u>	<u>Type of Action</u>
MGR	MUELLER, CATHERINE	4600 140th Ave N STE 180	<input checked="" type="checkbox"/> Add
		CLEARWATER, FLORIDA	<input type="checkbox"/> Remove
		33762	<input type="checkbox"/> Change
MGR	HOLDEN, GAIL	4600 140th Ave N STE 180	<input type="checkbox"/> Add
		CLEARWATER, FLORIDA	<input checked="" type="checkbox"/> Remove
		33762	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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2024 APR 20 PM 11:57
SECRETARY OF THE
TALLAHASSEE

2324 AUG 20 AM 11:57
SECRETARY OF THE
NAVY

2024 AUG 20 AM 11:57
JACKSONVILLE
FLA 32201

(If an effective 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 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

2024

Gust Holden

Gail Holden

Typed or printed name of signee