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COVER LETTER

	on of Cor				· ·	•	,
	HE LEAR	NING CUR√E GROUP, LLC					•
SUBJECT: _		Name of Lim	nited Liability Compar	у			
The enclosed A	articles of a	Amendment and fee(s) are sub	omitted for filing.				
Please return al	Il correspo	ndence concerning this matter	to the following:				
		Anita Ajay					
			Name of Perso	n		i	
		The Learning Curve Group	p. LLC				
			Firm/Compan	у			
		2538 Dr M.IK. Jr St N.					
			Address				
		St. Petersburg, FL 33704				•	202
			City/State and Zip	Code		7	2022 JUH
		ajguptaa@gmail.com					221
		E-mail address; ((to be used for future a	innual report notif	ication)		28
For further info	ermation co	oncerning this matter, please c	all:			* :*	P M
Anita Ajay			203 at (326 1520		;	.
	Name of	Person	Area Cod	e Daytime	: Telephone Number	<i>i</i>	S
Enclosed is a cl	heck for th	e following amount:					
□ \$25.00 Fili	ing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Certified Co (additional cop	ру	Certified	te of Statu	
	ng Addres stration S			eet Address: gistration Sec	etion		
		orporations		vision of Cor			
P.O.	Box 632	7	Th	e Centre of T	allahassee		
Talla	hassee. I	FL 32314	24	15 N. Monroc	Street, Suite 8	10	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE LEARNING CURVE GROUP, 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 _ Florida document number _ 1.22000255872 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A 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: N/A Name of New Registered Agent: N/A 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

. Florida

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>	<u>Address</u>	Type of Action
	N/A		□Add
			Петюvе
			□Change
			□Remove
			Change
			□ Add
			□Remove
			☐ Change
			□ Add
			□ Remove
		, <u>"</u>	□ Add
			□Remove
			DAdd
			□Remove
			□ Change

to	include the purpose of LLC in Article III as below:
"1	The purpose of the "The Learning Curve Group, LLC, shall be to own and operate a Kumon Math and Reading
C	enter franchise and for all other uses incidental thereto."
_	
_	
_	
_	
_	
-	
_	
_	
Effectiv	ve date, if other than the date of filing:
fan effo <u>Note:</u> I	ctive 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 f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as that of the date on the Department of State's records.
record d is file	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 ed.
Dated	June 17 2022
_	

Filing Fee: \$25.00

Typed or printed name of signee