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(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

Div	ision of Cor	porations				
SUBJECT:	PAVAN LI	EARNING LLC	•			
		Name of Lin	nited Liability Company			
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return	all correspo	indence concerning this matter	to the following:			
		VIJAYALAKSHMI GUT	TIPATTI			
			Name of Person			
		PAVAN LEARNING LLC	2			
			Firm/Company			
		16933 ENFIELD WAY			22	€. •<
			Address		938 E	77.
		LAKVILLE, 55044			P 12	AVISIDA OF CORFURAÇÃOS
		·	City/State and Zip Code		-P	9
		BHASKERGUTTIPATTI@			ယ္	<u></u>
			to be used for future annual report notifi	cation)	35	
For further in	formation co	oncerning this matter, please c	all:			•
BHASKER (GUTTIPAT	ГІ	612 219-1481 at ()			
	Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed is a	check for th	ne following amount:				
□ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee Certificate of Sta Certified Copy (additional copy is et	atus &	
	ling Addres		Street Address: Registration Sec	tion		

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

TO:

Registration Section

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

PAVAN LEARNING LLC (Name of the Limited Light	ility Company as it now appears on an	r records)
(A Flori	i <mark>lity Company as it now appears on ou</mark> da Limited Liability Company)	recorus.)
The Articles of Organization for this Limited Liability	Company were filed on 8/11/2022	and assigned
Florida document number L22000353988	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lir	mited liability company here:	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	N :-
	 	SE
Enter new mailing address, if applicable:		2 07 7 07
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u>း နိုင္ငံ</u> ယ မ်ား
		─
B. If amending the registered agent and/or register agent and/or the new registered office address here:		enter the name of the new regi
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	t address
		, Florida
	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 Ag	ent, 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>	Name	<u>Address</u>	Type of Action
			□ Remove
			Change
			□Add
			□Remove
			□Change 22 SUN STANDER
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all other uses incidental thereto	
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ive date, if other than the date of filing: [ective date is listed, the date must be specific and cannot be prior to date of filing.	(optional)
If the date inserted in this block does not meet the applicable statutory from 's effective date on the Department of State's records.	filing requirements, this date will not be list
d specifies a delayed effective date, but not an effective time, at 12:01 a.	.m. on the earlier of: (b) The 90th day after
led.	•
9/8/2022	

Typed or printed name of signee