

L23000041419

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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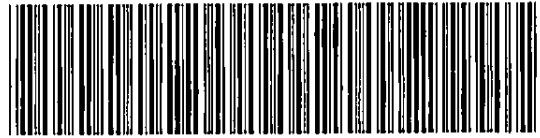
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Education Empowered Learning Studio, 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 Ann DeAngelis-Tyre

Name of Person

Education Empowered Learning Studio, LLC

Firm/Company

2155 Golden Meadow Way

Address

Bartow, FL 33830

City/State and Zip Code

eduempowered@outlook.com

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

For further information concerning this matter, please call:

Kelly Ann DeAngelis-Tyre

352 238-1012

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

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TALLAHASSEE, FL

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>	<u>Address</u>	<u>Type of Action</u>
AR	Rosalind Marie DeAngelis-Tyre	2155 Golden Meadow Way, Bartow, FL 33830	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Kelly Ann DeAngelis-Tyre	2155 Golden Meadow Way, Bartow FL 33830	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated February 17th 2023

Kelly Ann DeAngelis-Tyre
Signature of a member or authorized representative of a member

Kelly Ann DeAngelis-Tyre
Typed or printed name of signee

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S.D. DISTRICT OF FLORIDA
TALLAHASSEE, FL