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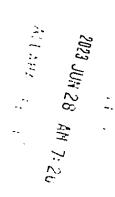
(Requestor's Name)
(Address)
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(Document Number)
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COVER LETTER

TO: Registration Se Division of Cor	ection porations		
SUBJECT:	tands of Love L	earning Linter 1	10
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Tak	Janga Bryant Name of Person	
	Hands of	Tak Learning Co	enter UC
	1236 21) Grandviu St Address	
	Lake	City FL 32055 City:State and Zip Code	
	tender to be	11 Sust net	notification)
For further information c	oncerning this matter, please ca	all:	
Name o	enne Bryant Person	at (<u>386</u>) — 90 Area Code — Da	5. 308 Q ytime Telephone Number
Enclosed is a check for the	he following amount:		
\$\display \text{\$\frac{1}{2}}\$ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy radditional 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hands of Love Lean	un Conter III	2023 JUH 28 AH 7. 20
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on	
		160 10:00
The Articles of Organization for this Limited Liability Co	ompany were filed on $\underline{\hspace{0.4cm} \hspace{0.4cm} 0.4$	400 Sand assigned
Florida document number L 33000 250 S97	_·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	All inhibits (1)	
The new hance must be distinguishable and contain the words. Limit	ted that mry Company, the desig	nation (LLC) or the appreviation "L.L.C.
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our reco	rds, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida .	street 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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
Mar	Talyone Bryant	4110 Sw Birly Are Welly &	3305-1 XIAdd
			🗀 Remove
			□Change
Ambe	Fonsa Bryanl	4910 Sw Birley Ave lately F	73995)
			□ Remove
			□Change
AMR	Ticona Bryant	4910 Sw Birly Due Later City Fr. 53	우소, \$10Add (
			□Remove
			□Change
			□Add
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'an effecti <u>(ote:</u> f 1	date, if other that ive date is listed, the date inserted in the date on a effective date on	ite must be spe this block do	cific and cannot as not meet the	applicable stat	f filing or more tha utory filing requ	(option 90 days after the surrements, this	iling.) Pursuant to 6	505.0207 isted as
record spliced.	pecifies a delayed ef	fective date,	but not an effe	ctive time, at 1	2:01 a.m. on the	earlier of: (b)	The 90th day a	fter the
ated	June 23.	_	<u> 303</u>	B				
		Signati	me of a member	or authorized rep	s presentative of a n	nember		
		_		or printed name				