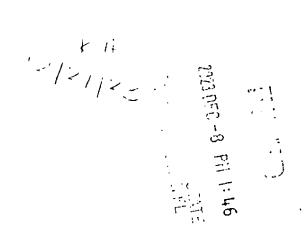
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(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:





12/08/23--01015--023 ++25.00



## **COVER LETTER**

P.O. Box 6327

Tallahassee, FL 32314

TO:		istration Sect ision of Corpo			
SUBJE	CT:	ITEACH LLC			
			Name of Lin	ited Liability Company	
The encl	losed	Articles of Ar	mendment and fee(s) are sub	emitted for filing.	
Please re	eturn	all correspond	dence concerning this matter	to the following:	
			Jessica Price		
				Name of Person	
			ITEACH LLC		
				Firm/Company	
			340 Sunset Drive		
				Address	
			Fort Lauderdale, Florida, 3	3301	
				City/State and Zip Code	<del> </del>
			iteach.jess@gmail.com	to be used for future annual report notific	arian)
For furth	ner ir	formation con	ncerning this matter, please c		anou)
Jesica P			<i>5</i>	.+1 . 4692684986	
			oerson .	at ( )	elephone Number
Cauloon	4:	about for the	following amount		20231
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<b>W</b> 323,	,00 r	mng ree	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Contified Copy (additional copy is enclosed)
	N.C - 1	11 4 2 3		Ca 4 11	, iii g
		ling Address: gistration Se	ection	<u>Street Address:</u> Registration Secti	on
		ision of Cor		Division of Corpo	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ITEACH LLC		
(Name of the Limited Liab) (A Flori	ility Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on 10/05/23	and assigned
Florida document number L23000461007	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and contain the words "Li	imited 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 ADD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register	·	ame of the new registere
agent and/or the new registered office address here:	:	2023
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	· · · · · · · · · · · · · · · · · · ·
	City	Zip Code
New Registered Agent's Signature, if changing Register	red Agent:	The on

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, 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>	Address	Type of Action
MNG	Jessica Price	340 Sunset Drive	
	Jessica J. Price	Fort Lauderdale	□Remove
	Q	Florida, 33301	☐ Change
			□Add
			□Remove
			Change
	<del></del>		□Add
		<del> </del>	□Remove
			□Change □Add □Add □Remove
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e: If the date ins	ted, the date must be erted in this bloc	ate of filing:  be specific and cannot be  ck does not meet the  artment of State's re	applicable statu	filing or more tory filing re	(optio than 90 days after t quirements, this	iling.) Purs	suant to 605.0
cord specifies a d s filed.	elayed effective o	date, but not an effec	ctive time, at 12	:01 a.m. on t	he earlier of: (b)	The 90t	h day after
ed 11/8/23		·	·				
	rice						
Jessica F							

Filing Fee: \$25.00