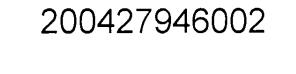
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Office Use Only



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7/27

COVER LETTER

	ew Filing Se- ivision of Co					
SUBJECT		earning Academy	LLC			
3003201	•	Na	me of Limite	d Liabilit	y Company	
The enclos	ed Articles of	Organization and	fee(s) are su	ıbmitted f	or filing.	
Please retu	rn all corresp	ondence concernir	ig this matte	r to the fo	llowing:	
	Natalia C G	olden				
			3	Name of F	Person	
	Tailored Ser	vices LLC				
				Firm/Con	ipany	
	2910 Kerry	Forest Parkway D	4 328			
				Addres	SS	
	Tallahassee.	FL 32309				
	tailoredsves@	Poutlook.com	City	State and	Zip Code	
-			be used for	future an	nual report notificati	ion)
For further in	nformation co	ncerning this matt	er, please ca	H:		
	Natalia C Go	olden	850 at ()	815-6922	
	Nam	ie of Person	\	Code	Daytime Telephon	e Number
Enclosed is	s a check for t	he following amou	int:			
	Filing Fee	■\$130.00 Filir Certificate of S	ng Fee & Status	Certifie	00 Filing Fec & d Copy copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		ng Address iling Section			treet Address lew Filing Section Di	ivision
	Divisi	on of Corporations	;	Т	he Centre of Tallaha	issee
		ox 6327 assee, FL 32314			415 N. Monroe Stre allahassee, FL 3230	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Tailored Learnin	<u></u>		
(Must	contain the words "Limited L	iability Company,	, "L.L.C.," or "LLC.")
ARTICLE II - Address:			
The mailing address and stre	et address of the principal of	Tice of the Limited	d Liability Company is:
<u>Prir</u>	ncipal Office Address:		Mailing Address:
101 N Monroe S	trosat	291	0 Kerry Forest Parkway
101 14 MOUROC 2	nect		
Ste 862	nect	D4:	
Ste 862 Tallahassee, FL 3 ARTICLE III - Registered The Limited Liability Comp	32301 Agent, Registered Office, & pany cannot serve as its own	D4 Tall Registered Age Registered Agent.	328 ahassee, FL 32309
Ste 862 Tallahassee, FL: ARTICLE III - Registered The Limited Liability Companother business entity with	32301 Agent, Registered Office, &	Registered Age Registered Agent.	328 ahassee, FL 32309 nt's Signature:
Ste 862 Tallahassee, FL: ARTICLE III - Registered The Limited Liability Companother business entity with	Agent, Registered Office, & pany cannot serve as its own an active Florida registration	Registered Agent. 1.) agent are:	328 ahassee, FL 32309 nt's Signature:
Ste 862 Tallahassee, FL: ARTICLE III - Registered The Limited Liability Companother business entity with	Agent, Registered Office, & pany cannot serve as its own an active Florida registration reet address of the registered	Registered Agent. 1.) agent are:	328 ahassee, FL 32309 nt's Signature:
Ste 862 Tallahassee, FL: ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, & pany cannot serve as its own an active Florida registration reet address of the registered	Registered Agent. 1.) agent are: Name	328 ahassee, FL 32309 nt's Signature:
Ste 862 Tallahassee, FL: ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, & pany cannot serve as its own an active Florida registration reet address of the registered Tailored Services LLC	Registered Age Registered Agent. agent are: Name Stc 863	ahassee, FL 32309 nt's Signature: You must designate an individual or
Ste 862 Tallahassee, FL: ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, & pany cannot serve as its own an active Florida registration rect address of the registered Tailored Services LLC	Registered Age Registered Agent. agent are: Name Stc 863	ahassee, FL 32309 nt's Signature: You must designate an individual or

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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.

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

e date inserted in this block does not meet the applicable statutory filing requirements, this date will not ent's effective date on the Department of State's records. VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Natalia C Golden Typed or printed name of signee Filing Fees:	<u>litle:</u>	Nam.	·
AMBR Natalia C Golden 2910 Kerry Forest Parkway, D4 328 Tallahassee, FL 32309 V: Effective date, if other than the date of filing: (OPTIONAL) ive date is listed, the date must be specific and cannot be more than five business days prior to or 90 filing.) e date inserted in this block does not meet the applicable statutory filing requirements, this date will not int's effective date on the Department of State's records. VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Natalia C Golden Typed or printed name of signee Filing Fees:			
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