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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TINC SOLUTIONS, CORP

Account Number : 120240000130 Phone

: (786)690-9016

Fax Number

: (305)397-1382

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LEGACY LEARNING XPEDU, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

J. DENNIS

	Registration Sec Division of Corp			
CUPIE				
SUBJEC	, I: <u></u>	Name of Limit	ed Liability Company	
		ILEGACY LEARNING XPEDU, LLC Name of Limited Liability Company Articles of Amendment and fee(s) are submitted for filing. And Correspondence concerning this matter to the following: ANDREW SANCHEZ Name of Person TINC SOLUTIONS, CORP Finn/Company 5201 WATERFORD DISTRICT DR. SUITE 916 Address MIAMI, FL 33126 City/State and Zip Code INFO@TINCSOLUTIONS.COM E-mail address: (to be used for future annual report notification) formation concerning this matter, please call: ANCHIZ Name of Person Telephone Number check for the following amount: ling Fee \$50,00 Filing Fee & Certificate of Status Certified Copy (additional copy is anclosed) Ing Address: Street Address:		
			Name of Person	
		TINC SOLUTIONS, COR	P	
			Firm/Company	
		5201 WATERFORD DIST	RICT DR. SUITE 916	
			Address	
		MIAMI, FL 33126		
		INTO@TINCSOLUTIONS	-	
				ation)
For fund	er information co	ncerning this matter, please ca	AL:	
ANDRE	EW SANCHEZ			
	Name of	Person	Area Code Daytime T	elephone Number
Enclosed	is a check for the	e following amount:		
≅ \$ 25.	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
	Mailing Address		Street Address: Registration Section	On

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

To: DOC ENMIENDA

Page: 3 of 5 2024-12-13 21:24:56 GMT 13053971382 ARTICLES OF AMENDIMENT 13053971382

From: Andrew Sanchez

TO ARTICLES OF ORGANIZATION OF

LEGACY LEARNING XPEDU, LLC. (Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our recor	<u>(48.</u>)
The Articles of Organization for this Limited Liability Company Florida document number <u>L24000506790</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabilities and contain the words".	ity Company." the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		- 조취 문
Principal office address MUST BE A STREET ADDRESS)		
		10 <u>11</u>
		ing ∰ A D
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>ente</u>	er the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr	PSS
	. I	Florida
	Cini	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.

To: DOC ENMIENDA' Page: 4 of 5 2024-12-13 21:24:56 GMT 13053971382 From: Andrew Sanchez If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being address or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	ANDREW SANCHEZ CASTRILLON	5201 WATERFORD DISTRICT DR SUTTE 516 MEAMI, FL33126	
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Note:	ive date, if other than the date of filing: (optional) (ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed that it is effective date on the Department of State's records.	.0207 ed as
rccor d is fi	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.	r the
Dated	DECEMBER 13 2024	
	// 4/ /	
	Signature of a member or anthonized representative of a member	