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(Requestor's Name)						
(Address)						
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(C	ity/State/Zip/Phone #)				
PICK-UP		MAIL				
(8	usiness Entity Name)					
(Document Number)						
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Certified Copies	Certificates	of Status				
						
Special Instructions to Fil	ing Officer:					
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FILED
2023 JUN 22 AM 8: 37

A. RAMSEY JUN 2 3 2023



CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : , 813-916] 8416213

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE: June 14, 2023

ORDER TIME: 8:29 AM

ORDER NO. : 813916-063

CUSTOMER NO: 8416213

CHANGE OF AGENT

NAME: THE TEACHING SOURCE LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company: THE TEACHING	3 SOUF	RCE	LLC	
2.	(a)		((b)		
	,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		7901 4TH ST N STE 300			7901 4TH	ST N STE 300
		ST. PETERSBURG, FL 33702	_	_	ST. PETE	ERSBURG, FL 33702
		04/18/2023		M	12300000	4994
3.		Date of filing/registration in Florida	4.	_		Document number
5.	(a)	Registered Agent and Registered Office shown on the records of NORTHWEST REGISTERED AGENT LLC	the Floric	da U	Ocpt, of Stat	- - -
		Registered Office Address (MUST BE FLORIDA STREET) 7901 4TH ST N STE 300	<u>ADDRES</u>	<u>(SS)</u>		711-EU 2023 JUN 22 AN 8: 37 2073 JUN 22 AN 8: 37
		ST. PETERSBURG , FL	33702			22 M 8: 31
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company NEW Registered Office Address:	istered Agent and/or NEW Registered Office address: Company		<u>ess</u> :	· · · · · · · · · · · · · · · · · · ·
1201 Hays Street						
		Tallahassee, FL	32301			- -
cha age wa	ange ent w s/we arti	mited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia- ter authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	register ability c of the lin limited	red om nite lia	office an pany, it is ed liability bility con	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in apany.
_		ure of a member or authorized representative of a member	_)	Cilini. A	Printed or typed name of signee
11. pro the to i	ierel ovisio obli mere tified	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. If I in writing of this change.	perforn d for in ierehy c	ian Ch :on,	ce of my i apter 605 firm that .	acity. I further agree to comply with the