I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

#### SIGNATURE: ARLEEN BELLON

City-State-Zip: MIAMI LAKES FL 33014

Electronic Signature of Signing Officer/Director Detail

#### DOCUMENT# N11000004264

Entity Name: MATER LAKES ACADEMY PTSO CORP

# Current Principal Place of Business:

17300 NW 87TH AVENUE PTSO MIAMI, FL 33015

### **Current Mailing Address:**

6671 LAKE BLUE DRIVE MIAMI LAKES, FL 33014 US

### FEI Number: 80-0741101

# Name and Address of Current Registered Agent:

BELLON, ARLEEN 6671 LAKE BLUE DRIVE MIAMI LAKES, FL 33014 US FILED Mar 21, 2024 Secretary of State 7510813080CC

Certificate of Status Desired: Yes

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:	ARLEEN BELLON			03/21/2024
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title \	VP	Title	TREASURER	
Name \	VILLAO, PAOLA K.	Name	VINALS, YUDYSVEL	
Address	18845 NW 62ND AVE APT 106	Address	9044 NW 120 STREET	
City-State-Zip: H	HIALEAH FL 33015	City-State-Zip:	HIALEAH GARDENS FL 33018	3
Title	S	Title	S	
Name F	RODRIGUEZ, HEYDIS	Name	CARRAZANA, JENNY	
Address 2	255 E 34 ST	Address	5022 NW 173RD DRIVE	
City-State-Zip: H	HIALEAH FL 33013	City-State-Zip:	MIAMI FL 33055	
Title	S	Title	SECRETARY	
Name F	ROCHA, PATRICIA	Name	RIVERA, VERONICA	
Address 7	7010 NW 186 ST #505	Address	8881 NW 189TH TERRACE	
City-State-Zip: H	HIALEAH FL 33015	City-State-Zip:	HIALEAH FL 33018	
Title F	PRESIDENT			
Name E	BELLON, ARLEEN			
Address 6	6671 LAKE BLUE DRIVE			

PRESIDENT

03/21/2024 Date