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.

PRESIDENT

SIGNATURE: DONDREA STEVENS

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N12000006162

Entity Name: BEEZ LEARNING ACADEMY, INC

Current Principal Place of Business:

1130 EAST PLANT STREET WINTER GARDEN, FL 34787

Current Mailing Address:

4511 SEYBOLD AVENUE ORLANDO, FL 32808

FEI Number: 45-5469382

Name and Address of Current Registered Agent:

JENKINS, ROBIN A 4202 KEY BISCAYNE LANE 317 WINTER PARK, FL 32792 US

Date

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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	Р	Title	VP
Name	STEVENS, DONDREA C	Name	CLARK, BETTYE
Address	4511 SEYBOLD AVENUE	Address	1467 KENNY COURT
City-State-Zip:	ORLANDO FL 32808	City-State-Zip:	WINTER GARDEN FL 34787
Title	TR	Title	SEC
Title Name	TR STEVENS, RON	Title Name	SEC DEMPS, TARNISA

04/23/2014

Date