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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. VICE PRESIDENT 04/09/2019

SIGNATURE: JODI SLONAKER

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P0900007835

Entity Name: TEACH N KIDS LEARN, INC.

## **Current Principal Place of Business:**

14 NE FIRST AVE 10TH FLOOR MIAMI, FL 33132

# **Current Mailing Address:**

14 NE FIRST AVE **10TH FLOOR** MIAMI, FL 33132 US

## FEI Number: 26-4135612

## Name and Address of Current Registered Agent:

SLONAKER, JODI 14 NE FIRST AVE 10TH FLOOR MIAMI, FL 33132 US

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	: JODI SLONAKER			04/09/2019
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	D	Title	D	
Name	AZCUY, RODOLFO	Name	FIORINI, CHRISTINE	
Address	590 OCEAN DRIVE	Address	11535 PIPPIN ROAD	
City-State-Zip:	3B KEY BISCAYNE FL 33149	City-State-Zip:	CINCINNATI OH 45231	
Title	D			
Name	SLONAKER, JODI			
Address	2609 KETTERER CIRCLE NW			
City-State-Zip:	NORTH CANTON OH 44720			

FILED Apr 09, 2019 Secretary of State 7736480192CC

Certificate of Status Desired: No

Date