

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000031671

**Entity Name:** CORIS EDUCATION MANAGERS, LLC

**Current Principal Place of Business:**

9775 SW 87 AVE.  
MIAMI, FL 33176

**Current Mailing Address:**

6800 NERVIA STREET  
CORAL GABLES, FL 33146

**FEI Number:** 26-4582929

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MELAND RUSSIN & BUDWICK PA  
3000 WACHOVIA FINANCIAL CETER  
200 SOUTH BISCAYNE BLVD  
MIAMI, FL 33131 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name COHEN, PETER  
Address 6800 NERVIA STREET  
City-State-Zip: CORAL GABLES FL 33146

Title MGR  
Name ORTEGA, JORGE  
Address 6800 NERVIA STREET  
City-State-Zip: CORAL GABLES FL 33146

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PETER COHEN

**MANAGER**

**02/08/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date