

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000149720

**Entity Name:** MATH MONKEY USA, LLC**Current Principal Place of Business:**12659 SOUTH DIXIE HIGHWAY  
PINECREST, FL 33156**Current Mailing Address:**12659 SOUTH DIXIE HIGHWAY  
PINECREST, FL 33156 US**FEI Number:** 46-1607782**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MONIOUDIS, PERRY D  
800 SE THIRD AVENUE  
SUITE 200  
FT. LAUDERDALE, FL 33316 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           | MGRM                       |
| Name            | THE KUTTENKULER GROUP, LLC |
| Address         | 15061 NALL AVENUE          |
| City-State-Zip: | LEAWOOD KS 66223           |

|                 |                                |
|-----------------|--------------------------------|
| Title           | MGRM                           |
| Name            | SCHOLASTIC ZOO OF SUWANEE, LLC |
| Address         | 3651 PEACHTREE PKWY            |
| City-State-Zip: | SUWANEE GA 30024               |

|                 |                               |
|-----------------|-------------------------------|
| Title           | MGRM                          |
| Name            | B&R EDUCATIONAL SERVICES, LLC |
| Address         | 12659 SOUTH DIXIE HIGHWAY     |
| City-State-Zip: | PINECREST FL 33156            |

|                 |                               |
|-----------------|-------------------------------|
| Title           | MGRM                          |
| Name            | HANGIN' WITH THE COOPERS, LLC |
| Address         | 1121M ROUTE 34                |
| City-State-Zip: | ABERDEEN NJ 07747             |

|                 |                           |
|-----------------|---------------------------|
| Title           | EHR SPECIALTIES, INC      |
| Name            | EHR SPECIALTIES, INC      |
| Address         | 3720 BRAINARD RD          |
| City-State-Zip: | WOODMERE VILLAGE OH 44122 |

*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:** CHRISTOPHER KUTTENKULER**MEMBER****01/17/2018**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date