# that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CONSTANCE ORTIZ

1900 S HARBOR CITY BLVD STE 120 MELBOURNE, FL 32901

**Current Principal Place of Business:** 

Entity Name: GREEN APPLE SCHOOL MANAGEMENT, LLC

## **Current Mailing Address:**

DOCUMENT# L12000156844

1900 S HARBOR CITY STE 120 MELBOUNRE, FL 32901 US

### FEI Number: 46-1615623

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

REPPERGER, CLIFF R JR ESQ 2101 WAVERLY PLACE SUITE 100 MELBOURNE, FL 32901 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: CLIFF REPPERGER JR., ESQ.

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

Title MGR ORTIZ. CONSTANCE Name Address **112 DELVALLE STREET** City-State-Zip: MELBOURNE BEACH FL 32951

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

MANAGER

Certificate of Status Desired: No

Electronic Signature of Signing Authorized Person(s) Detail



Feb 05, 2024 Secretary of State 6738152071CC

> 02/05/2024 Date

02/05/2024 Date