

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000036674

Entity Name: MICROSCHOOL, LLC

Current Principal Place of Business:

395 HOLMAN ROAD
CAPE CANAVERAL, FL 32920

Current Mailing Address:

PO BOX 1018
CAPE CANAVERAL, FL 32920

FEI Number: 46-5100937

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALDER, SANDRA
397 HOLMAN ROAD
CAPE CANAVERAL, FL 32920 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 WALDER, SANDRA
Address PO BOX 1018
City-State-Zip: CAPE CANAVERAL FL 32920

Title AMBR
Name MCMILLIN, BRENDAN
Address PO BOX 1018
City-State-Zip: CAPE CANAVERAL FL 32920

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: SANDRA WALDER

MANAGING MEMBER

03/19/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date