## 2016 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

FILED Apr 28, 2016

**Secretary of State** 

CC7321040985

Authorized Person(s) Detail:

Title MGR

IGR Title AMBR

Name WALDER, SANDRA Name MCMILLIN, BRENDAN

Address PO BOX 1018 Address PO BOX 1018

City-State-Zip: CAPE CANAVERAL FL 32920 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.

Electronic Signature of Signing Authorized Person(s) Detail