Electronic Signature of Signing Authorized Person(s) Detail

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

City-State-Zip: ORLANDO FL 32835

SIGNATURE: DANIEL AGUIAR DE MELO

Address	6150 METROWEST BLVD STE 305B	Address	6150 METROWEST BLVD STE 305B
City-State-Zip:		City-State-Zip:	ORLANDO FL 32835
Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
		Name	COGA, JORGE
Name	AZEVEDO FRACON, MAURICIO	Address	RUA VICENTE DE CARVALHO, 716 AP
Address	6150 METROWEST BLVD		91
	SUITE 305B	City-State-Zip:	SAO BERNARDO DO CAMPO SP
City-State-Zip:	ORLANDO FL 32835		09732-600
Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	ARNALDO SARTOLETO, LUIS	Name	TOLEDO, EDUARDO
Address	RUA LUIZ FERREIRA DA SILVA, 352 AP 84	Address	6150 METROWEST BLVD SUITE 305B
City-State-Zip:	SAO BERNARDO DO CAMPO SP 09732-340	City-State-Zip:	ORLANDO FL 32835
		Title	MANAGER
Title	AUTHORIZED MEMBER	Name	AMERICA EDUCATION MANAGEMENT
Name	BIONDO BASTOS, DANIEL ANTONIO		LLC
Address	6150 METROWEST BLVD SUITE 305B	Address	6150 METROWEST BLVD SUITE 305B

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

FEI Number: 47-0986215

Name and Address of Current Registered Agent:

LARSON ACCOUNTING AND CONSULTING SERVICES 7901 KINGSPOINTE PKWY STE 17 ORLANDO, FL 32819 US

AUTHORIZED MEMBER

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.

Title

Name

SIGNATURE:

Title

Name

Electronic Signature of Registered Agent

GARCIA PEREIRA, MARCOS ANTONIO

Authorized Person(s) Detail :

Entity Name: A15 INVESTMENTS LLC

Current Principal Place of Business:

6150 METROWEST BLVD SUITE 305B ORLANDO, FL 32835

Current Mailing Address:

6150 METROWEST BLVD SUITE 305B ORLANDO, FL 32835 US

2016 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT DOCUMENT# L14000086000

FILED Dec 09, 2016 Secretary of State CC0058243594

Certificate of Status Desired: No

AUTHORIZED MEMBER

City-State-Zip: ORLANDO FL 32835

Continues on page 2

MGR

DE MELO AGUIAR, MARIA ALICE

Date

Date

12/09/2016

Authorized Person(s) Detail Continued :

Title	MANAGER
Name	AGUIAR DE MELO, DANIEL
Address	6150 METROWEST BLVD SUITE 305B
City-State-Zip:	ORLANDO FL 32835