

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000158020

**Entity Name:** EDUEXPLORA INTERNATIONAL LLC

**Current Principal Place of Business:**

1101 BRICKELL AVE.  
SOUTH TOWER 8TH FLOOR  
MIAMI, FL 33131

**Current Mailing Address:**

1101 BRICKELL AVE.  
SOUTH TOWER 8TH FLOOR  
MIAMI, FL 33131 US

**FEI Number:** 61-1771449

**Certificate of Status Desired:** No

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

RAPAPORT ZIMERMANN, ARIE J  
251 CRANDON BLVD  
APT 1022  
KEY BISCAYNE, FL 33149 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 RAPAPORT ZIMERMANN, ARIE J  
Address 251 CRANDON BLVD.  
APT 1022  
City-State-Zip: KEY BISCAYNE FL 33149

Title AMBR  
Name TAWRYCKY, DANIEL L  
Address AVE. TOBALABA 591  
APT. 73  
City-State-Zip: SANTIAGO 75000

Title AMBR  
Name CERONI, BARBARA  
Address 789 CRANDON BLVD.  
CLUB TOWER 1 405  
City-State-Zip: MIAMI FL 33149

*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:** ARIE J. RAPAPORT ZIMERMANN

**MGR**

**02/09/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date