

**2022 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L18000090606

**Entity Name:** UNIVERSIDAD DE CHILE USA LLC

**Current Principal Place of Business:**

8450 NW 102ND AVE  
443  
DORAL, FL 33178

**Current Mailing Address:**

8450 NW 102ND AVE  
443  
DORAL, FL 33178 US

**FEI Number:** 83-0767480

**Certificate of Status Desired:** No

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

MONTGOMERY, WILLIAM F  
8450 NW 102ND AVE  
443  
DORAL, FL 33178 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:** WILLIAM F MONTGOMERY

10/14/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                          |                 |                          |
|-----------------|--------------------------|-----------------|--------------------------|
| Title           | PRESIDENT                | Title           | MANAGER                  |
| Name            | MONTGOMERY, WILLIAM F    | Name            | MONTGOMERY, WENDY        |
| Address         | 8450 NW 102ND AVE<br>443 | Address         | 8450 NW 102ND AVE<br>443 |
| City-State-Zip: | DORAL FL 33178           | City-State-Zip: | DORAL FL 33178           |

*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:** WENDY MONTGOMERY

MAMAGER

10/14/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date