# 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: JUAN PABLO AMBROSINI

Electronic Signature of Signing Authorized Person(s) Detail

# Entity Name: SCHOOL TIME TRACKER LLC

## **Current Principal Place of Business:**

3539 NW 82 TERRACE COOPER CITY, FL 33024

#### **Current Mailing Address:**

DOCUMENT# L18000207554

3539 NW 82 TERRACE COOPER CITY, FL 33024

#### FEI Number: 83-1943397

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

AMBROSINI, JUAN P 3539 NW 82 TERRACE COOPER CITY, FL 33024 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

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	AMBROSINI, JUAN P	Name	DJENDEREDJIAN, HORACIO J
Address	3539 NW 82 TERRACE	Address	3539 NW 82 TERRACE
City-State-Zip:	COOPER CITY FL 33024	City-State-Zip:	COOPER CITY FL 33024

MGRM

Apr 27, 2019 Secretary of State 4649139781CC

Date

FILED

Certificate of Status Desired: No

04/27/2019

Date