

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000284732

**Entity Name:** UNIVERSITY OF SALAMANCA SPANISH PROGRAMS, LLC

**Current Principal Place of Business:**

299 ALHAMBRA CIRCLE, STE 521  
CORAL GABLES, FL 33134

**Current Mailing Address:**

299 ALHAMBRA CIRCLE, STE 521  
CORAL GABLES, FL 33134 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

FORS, JORGE L ESQ  
1108 PONCE DE LEON BLVD  
CORAL GABLES, FL 33134 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           MANAGER  
Name            SANCHEZ LLORENTE, JOSE MIGUEL  
                  DR.  
Address         299 ALHAMBRA CIRCLE, STE 521  
City-State-Zip: CORAL GABLES FL 33134

*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:** JOSE MIGUEL SANCHEZ LLORENTE

**MANAGER**

**03/12/2019**

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

\_\_\_\_\_ Date