

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000218235

**Entity Name:** ALEPH HOMESCHOOL AND TUTORING LLC

**Current Principal Place of Business:**

3650 NORTH 56TH AVENUE APT 514  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

3650 NORTH 56TH AVENUE APT 514  
HOLLYWOOD, FL 33021 UN

**FEI Number:** 84-3140284

**Certificate of Status Desired:** No

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

COHEN, SHARON  
3650 NORTH 56TH AVENUE APT 514  
HOLLYWOOD, FL 33021 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	Title	AMBR
Name	COHEN, SHARON	Name	NOAH, ADAM
Address	3650 N 56TH AVENUE APT 514	Address	3650 NORTH 56TH AVENUE APT 514
City-State-Zip:	HOLLYWOOD 33021	City-State-Zip:	HOLLYWOOD FL 33021

*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:** SHARON COHEN

MGR

02/09/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date