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. 04/06/2020

AMBR

SIGNATURE: SUSANA P ESTEVES CORREIA Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: SUMMER CAMPS CULTURAL EXCHANGE PROGRAMS LLC

Current Principal Place of Business:

15402 SUGAR CITRUS DR WINTER GARDEN. FL 34787

DOCUMENT# L19000294889

Current Mailing Address:

15402 SUGAR CITRUS DR WINTER GARDEN, FL 34787 US

FEI Number: 84-3960917

Name and Address of Current Registered Agent:

LEGIT CONSULTING SERVICES, LLC 6735 CONROY WINDERMERE RD 233 ORLANDO, FL 34786 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

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Authorized Person(s) Detail :

Title AMBR ESTEVES CORREIA. SUSANA P Name Address 15402 SUGAR CITRUS DR City-State-Zip: WINTER GARDEN FL 34787

FILED Apr 06, 2020 Secretary of State 5894060832CC

Certificate of Status Desired: No

Date

Date