

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000297008

**Entity Name:** TUTORING SPECIALISTS LLC

**Current Principal Place of Business:**

4307 HEAVEN TREES RD  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

4307 HEAVEN TREES RD  
JACKSONVILLE, FL 32207 US

**FEI Number: 85-3280244**

**Certificate of Status Desired: Yes**

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

LEGALINC CORPORATE SERVICES INC.  
5237 SUMMERLIN COMMONS  
SUITE 400  
FORT MYERS, FL 33907 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	AMBR	Title	AMBR
Name	VILLACORTABUER, TIFFANY	Name	FRITZ, DANNAH
Address	4307 HEAVEN TREES RD	Address	2716 BRANDYBUCK TRAIL
City-State-Zip:	JACKSONVILLE FL 32207	City-State-Zip:	JACKSONVILLE FL 32223

*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: TIFFANY VILLACORTABUER**

**CO-OWNER**

**04/22/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date