

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000433677

**Entity Name:** LITTLE LEARNING ADVENTURE LLC

**Current Principal Place of Business:**

320 CHARLES DRIVE  
DELAND, FL 32724

**Current Mailing Address:**

320 CHARLES DRIVE  
DELAND, FL 32724

**FEI Number:** 87-2968641

**Certificate of Status Desired:** No

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

MARTINEZ, MELISA E  
320 CHARLES DRIVE  
DELAND, FL 32724 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	MARTINEZ, MELISA E	Name	FONTANE, CHRISTIAN
Address	320 CHARLES DRIVE	Address	320 CHARLES DRIVE
City-State-Zip:	DELAND FL 32724	City-State-Zip:	DELAND FL 32724

*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:** MELISA MARTINEZ

**MANAGER**

**05/01/2023**

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

\_\_\_\_\_  
Date