

# 2010 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000026894

**FILED**  
**Oct 01, 2010**  
**Secretary of State**

**Entity Name:** ALLIANCE ACADEMIES OF CENTRAL FLORIDA, LLC

**Current Principal Place of Business:**

1862 E WINTER PARK ROAD  
ORLANDO, FL 32803

**New Principal Place of Business:**

**Current Mailing Address:**

1862 E. WINTER PARK ROAD  
ORLANDO, FL 32803

**New Mailing Address:**

FEI Number: 52-2384353

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HADDOCK PROFESSIONAL ASSOCIATION  
3300 UNIVERSITY BLVD.  
WINTER PARK, FL 32792 US

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

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: EDWARD HADDOCK

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LYMAN, NIEVES A  
Address: 1698 HIBISCUS AVENUE  
City-St-Zip: WINTER PARK, FL 32789

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: NIEVES LYMAN

MGRM

10/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date