

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000083440

**FILED**  
**Dec 18, 2013**  
**Secretary of State**

**Entity Name:** RENAISSANCE EDUCATIONAL RESOURCES LLC

**Current Principal Place of Business:**

5237 SUMMERLIN COMMONS BLVD  
SUITE 201  
FORT MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

5237 SUMMERLIN COMMONS BLVD  
SUITE 201  
FORT MYERS, FL 33907

**New Mailing Address:**

**FEI Number:** 20-3696656

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

COHEN, CELESTE P  
11092 YELLOW POPLAR DR.  
FORT MYERS, FL 33913 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: CELESTE P. COHEN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: COHEN, CELESTE P  
Address: 11092 YELLOW POPLAR DR.  
City-St-Zip: FORT MYERS, FL 33913

Title: MGR  
Name: MEJIA, MIRNA  
Address: 8760 FAWN RIDGE DR  
City-St-Zip: FORT MYERS, FL 33912

Title: MGR  
Name: AGUIRRE, VANESSA M  
Address: 8760 FAWN RIDGE DR  
City-St-Zip: FORT MYERS, FL 33912

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: CELESTE P. COHEN

MGRM

12/18/2013

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