

L0800000 66702

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DIVISION OF CORPORATIONS
12 MAY - 1 PM 4: 28

MAY - 2 2012
T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: American Explorer Academy
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jose Bauzo
Name of Person

American Explorer Academy
Firm/Company

14118 Islamorada Dr.
Address

Orlando FL 32837
City/State and Zip Code

exploracademy@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jose Bauzo at (407) 488-7225
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

12 MAY -1 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 12, 2012

JOSE BAUZO
14118 ISLAMORADA DR
ORLANDO, FL 32837

SUBJECT: AMERICAN EXPLORER ACADEMY LLC
Ref. Number: L08000066702

We have received your document for AMERICAN EXPLORER ACADEMY LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 312A00011643

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: American Explorer Academy
2. (a) Principal office address of limited liability company: 14118 Islamorada Dr.
Orlando, FL 32837
(Note: **MUST BE STREET ADDRESS**)

(b) Mailing address of limited liability company: _____

(Note: **MAY BE POST OFFICE BOX**) _____

3. Date of filing/registration in Florida: July 8, 2008
4. Document number: LD8000066702

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Jose Bauzo
Registered Office Address: 14118 Islamorada Dr.
Orlando, FL 32837

- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: Arley Avila
NEW Registered Office Address: 14118 Islamorada Dr.
(MUST BE FLORIDA STREET ADDRESS) Orlando, FL 32837
_____, FL _____

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Jose Bauzo
Signature of a member or authorized representative of a member
Jose Bauzo Maria Bauzo
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Jose Bauzo
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
MAY - 1 PM 4:28