

L16 0000 63161

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EDU First, LLC
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:

Lauren Burcl
Name of Person

EDU First, LLC
Firm/Company

6245 Powerline Rd Suite 204
Address

Fort Lauderdale, FL 33309
City/State and Zip Code

LBURCL@edufirst.biz
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lauren Burcl at (954) 425-6115
Name of Person Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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: EDU First, LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

1051 NE 28th Ave.
Pompano Beach, FL 33062

6245 Powerline Rd Suite 204
Fort Lauderdale, FL 33309

3. 03/16/2021 4. L16000063161
Date of filing/registration in Florida Document number

5. (a) Wayne H. Rassner, Esq.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

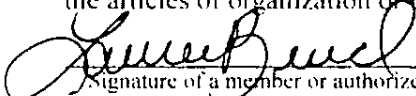
Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**
7700 N. Kendall Drive, Suite 509
Miami, FL 33156

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

6245 Powerline Rd Suite 204
NEW Registered Office Address:
Fort Lauderdale, FL 33309
_____, FL _____

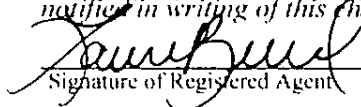
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TALLAHASSEE, FLORIDA

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.


Signature of a member or authorized representative of a member

Lauren Burci
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 605, 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.


Signature of Registered Agent

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000063161

Entity Name: EDU FIRST, LLC

Current Principal Place of Business:

1051 NE 28TH AVENUE
POMPANO BEACH FL 33062

Current Mailing Address:

1051 NE 28TH AVENUE
POMPANO BEACH, FL 33062 US

FEI Number: 81-2098116

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RASSNER, WAYNE H. ESQ
7700 N KENDALL DRIVE
509
MIAMI, FL 33156 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: WAYNE H. RASSNER

03/16/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name BURCEL, CHRIS
Address 1051 NE 28TH AVENUE
City-State-Zip POMPANO BEACH FL 33062

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 805, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHRIS BURCEL

MGR

03/16/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date