above, or on an attachment with all other like empowered. FOUNDER/PRESIDENT 01/26/2023

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N0800002167

Entity Name: MONTESSORI HOUSE OF OCALA, INC.

Current Principal Place of Business:

9880 SW 84TH COURT SUITE D OCALA, FL 34481

Current Mailing Address:

9880 SW 84TH COURT OCALA, FL 34481 US

FEI Number: 26-1615284

Name and Address of Current Registered Agent:

FERRER, JILL JMRS. 9880 SW 84TH COURT OCALA, FL 34481 US

FILED Jan 26, 2023 Secretary of State 4918831036CC

Date

Certificate of Status Desired: Yes

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

Officer/Director Detail :

Officer/Director Detail :			
Title	PD	Title	VPD
Name	FERRER, JILL J	Name	BEATTY, SHANNON A
Address	13680 SW 71ST LANE	Address	23228 SW MARINE BLVD.
City-State-Zip:	OCALA FL 34481	City-State-Zip:	DUNNELLON FL 34431
Title	SD	Title	TD
Name	FERRER, JAMIE	Name	FERRER, VICTOR MJR.
Address	5326 SW 129TH PLACE	Address	13680 SW 71ST LANE
City-State-Zip:	OCALA FL 34473	City-State-Zip:	OCALA FL 34481
Title	D	Title	D
Title Name	D FERRER, KRYSTLE M	Title Name	D ZIMMERMAN, ALESANDRA
	-		-
Name	FERRER, KRYSTLE M	Name	ZIMMERMAN, ALESANDRA
Name Address	FERRER, KRYSTLE M 8414 SW 101 PLACE RD	Name Address	ZIMMERMAN, ALESANDRA 7690 SW 102 LOOP
Name Address City-State-Zip:	FERRER, KRYSTLE M 8414 SW 101 PLACE RD OCALA FL 34481	Name Address City-State-Zip:	ZIMMERMAN, ALESANDRA 7690 SW 102 LOOP OCALA FL 34476
Name Address City-State-Zip: Title	FERRER, KRYSTLE M 8414 SW 101 PLACE RD OCALA FL 34481 D	Name Address City-State-Zip: Title	ZIMMERMAN, ALESANDRA 7690 SW 102 LOOP OCALA FL 34476 DIRECTOR
Name Address City-State-Zip: Title Name	FERRER, KRYSTLE M 8414 SW 101 PLACE RD OCALA FL 34481 D LUGO, JESSICA	Name Address City-State-Zip: Title Name	ZIMMERMAN, ALESANDRA 7690 SW 102 LOOP OCALA FL 34476 DIRECTOR VIZZONE, ASHLEY

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears

SIGNATURE: JILL FERRER

Date