

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000053447

**Entity Name:** ELOGIC LEARNING, LLC

**Current Principal Place of Business:**

14934 N FLORIDA AVE  
TAMPA, FL 33613

**Current Mailing Address:**

14934 N FLORIDA AVE  
TAMPA, FL 33613

**FEI Number:** 20-1386041

**Certificate of Status Desired:** No

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

ANDERSON, MARK CEO  
14934 N FLORIDA AVE  
TAMPA, FL 33613 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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	CEO	Title	CTO
Name	ANDERSON, MARK	Name	SNOWDON, BILL
Address	14934 N FLORIDA AVE	Address	14934 N FLORIDA AVE
City-State-Zip:	TAMPA FL 33613	City-State-Zip:	TAMPA FL 33613

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

**SIGNATURE:** MARK ANDERSON

CEO

01/09/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date