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: THOMAS SWEENEY

City-State-Zip: SARASOTA FL 34241

SIGNATURE:

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.

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

TitleMGRMNameSWEENEY, THOMAS MIIAddress9180 SWAYING BRANCH RD

Entity Name: SOUTHEASTERN EDUCATIONAL & TECHNICAL INSTITUTE,

DOCUMENT# L05000108170

Current Principal Place of Business: 5922 CATTLEMEN LANE STE 201 SARASOTA, FL 34232

LLC

Current Mailing Address:

5922 CATTLEMEN LANE STE 201 SARASOTA, FL 34232

FEI Number: 20-4034117

Name and Address of Current Registered Agent:

SWEENEY, THOMAS MPRESIDE 5922 CATTLEMEN LANE #201 SARASOTA, FL 34232 US

Date

FILED Apr 24, 2017 Secretary of State CC9088970513

Certificate of Status Desired: No

Electronic Signature of Signing Authorized Person(s) Detail