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: ANNETTE IRAOLA

Electronic Signature of Signing Authorized Person(s) Detail

MIAMI, FL 33143 US FEI Number: 20-4373989

Name and Address of Current Registered Agent:

IRAOLA, ANNETTE 6457 SUNSET DRIVE MIAMI, FL 33143 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: ANNETTE IRAOLA

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title MGR Name IRAOLA, ANNETTE 6457 SUNSET DRIVE Address City-State-Zip: MIAMI FL 33143

04/22/2019 Date

Certificate of Status Desired: No

FILED Apr 22, 2019 Secretary of State 0732974550CC

04/22/2019

MANAGER

Date

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000020276

Entity Name: ACADEMICA CHARTER SCHOOLS FACILITY LLC

Current Principal Place of Business:

6457 SUNSET DRIVE MIAMI. FL 33143

Current Mailing Address: 6457 SUNSET DRIVE