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

SIGNATURE: ERNESTO A. PEREZ

Current Mailing Address:

95 MERRICK WAY SUITE 700 CORAL GABLES, FL 33134 US

FEI Number: 45-2384009

Name and Address of Current Registered Agent:

PEREZ, ERNESTO A 95 MERRICK WAY SUITE 700 CORAL GABLES, FL 33134 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

Authorized Person(s) Detail :			
Title	MGRM	Title	CFO
Name	PEREZ, ERNESTO A	Name	GRESSETT, CHRIS J
Address	95 MERRICK WAY SUITE 700	Address	95 MERRICK WAY SUITE 700
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134

SUITE 700 CORAL GABLES, FL 33134

95 MERRICK WAY

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000093595

Entity Name: FLORIDA EDUCATION CENTER OF HOMESTEAD, LLC

Current Principal Place of Business:

FILED Feb 19, 2013 Secretary of State CC8567229907

Certificate of Status Desired: No

MANAGING MEMBER 02/19/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date