

**2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000116450

**Entity Name:** WHEATLAND TECHNICAL INSTITUTE LLC

**Current Principal Place of Business:**

2393 S CONGRESS AVE  
127 B  
WEST PALM BEACH, FL 33415

**Current Mailing Address:**

2393 S CONGRESS AVE  
127 B  
WEST PALM BEACH, FL 33415 US

**FEI Number:** 27-3897806

**Certificate of Status Desired:** No

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

CEME, NIXON  
2393 S CONGRESS AVE  
WEST PALM BEACH, FL 33406 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:** NIXON CEME

05/01/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name CEME, NIXON  
Address 2903 POOLSIDE DR  
City-State-Zip: GREENACRES FL 33463

Title MGR  
Name CEME, NIXON  
Address 2393 S CONGRESS AVE  
127B  
City-State-Zip: WEST PALM BEACH FL 33415

*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:** NIXON CEME

AMBR

05/01/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date