

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000164310

**Entity Name:** EXCEPTIONAL EDUCATION DATA SOLUTIONS, LLC

**Current Principal Place of Business:**

6231 STARHILL DRIVE  
MILTON, FL 32570

**Current Mailing Address:**

6231 STARHILL DRIVE  
MILTON, FL 32570 US

**FEI Number: 80-0964075**

**Certificate of Status Desired: No**

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

BEGGS & LANE, RLLP  
501 COMMENDENCIA STREET  
PENSACOLA, FL 32503 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           | MGR                 | Title           | MGR                |
| Name            | SESSIONS, CHRISTI   | Name            | SESSIONS, ELAINE   |
| Address         | 6231 STARHILL DRIVE | Address         | 7001 TRAMMEL DRIVE |
| City-State-Zip: | MILTON FL 32570     | City-State-Zip: | MILTON FL 32570    |

*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: ELAINE L SESSIONS**

**CO-MANAGER**

**02/15/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date