2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 11, 2019
Secretary of State
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Entity Name: SOVEREIGN SCHOOL OF NURSING, LLC

Current Principal Place of Business:

540 NW 165TH ST RD
#302
MIAMI, FL 33169

Current Mailing Address:

PO BOX 640342
MIAMI, FL 33164 US

FEI Number: 47-4750156

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCLEAN, LISIA
2040 NE 163RD STREET
#303
NORTH MIAMI BEACH, FL 33162 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: LISIA MCLEAN 02/11/2019

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MBR	Title	DIRECTOR
Name	MCLEAN, CLAUDIA	Name	MCLEAN, LISIA
Address	2040 NE 163RD ST, SUITE 303	Address	PO BOX 640342
City-State-Zip:	NORTH MIAMI BEACH FL 33162	City-State-Zip:	MIAMI FL 33164

Title	DIRECTOR
Name	MCLEAN, DIANA
Address	PO BOX 640342
City-State-Zip:	MIAMI FL 33164

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: CLAUDIA MCLEAN DIRECTOR 02/11/2019

Electronic Signature of Signing Authorized Person(s) Detail — Date