

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000067905

Entity Name: KNIGHT INSTITUTE OF EDUCATION, LLC

Current Principal Place of Business:

4028 MEADOWLARK DR
KISSIMMEE, FL 34746

Current Mailing Address:

PO BOX 690912
ORLANDO, FL 32869 US

FEI Number: 82-3268030

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

OHWOVORIOLE, BENJAMIN DR
4028 MEADOWLARK DR
KISSIMMEE, FL 34746 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
Name OHWOVORIOLE, BENJAMIN DR.
Address 4028 MEADOWLARK DR
City-State-Zip: KISSIMMEE FL 34746

Title AUTHORIZED MEMBER
Name USEH, USHOTANEFE DR.
Address 4028 MEADOWLARK DR
City-State-Zip: KISSIMMEE FL 34746

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: BENJAMIN OHWOVORIOLE

DR.

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date