

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000110871

**Entity Name:** ELEVATIONS LEARNING ACADEMY, LLC

**Current Principal Place of Business:**

207 NW 23RD AVENUE  
GAINESVILLE, FL 32609

**Current Mailing Address:**

207 NW 23RD AVENUE  
GAINESVILLE, FL 32609 US

**FEI Number:** 47-4380252

**Certificate of Status Desired:** No

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

NATTIEL, ALYCIA M  
1411 SE 3RD AVENUE  
GAINESVILLE, FL 32641 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           MANAGER  
Name           NATTIEL, ALYCIA M  
Address        1411 SE 3RD AVENUE  
City-State-Zip: GAINESVILLE FL 32641

*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:** ALYCIA NATTIEL

**MANAGER**

**03/18/2024**

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

\_\_\_\_\_  
Date