

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000141973

**Entity Name:** VILARDO TUTORING LLC

**Current Principal Place of Business:**

16 W SHADY OAKS LN  
UNIT D  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

93 DUNE LAKES CIR UNIT N207  
SANTA ROSA BEACH, FL 32459 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

VILARDO, BRANSEN  
93 DUNE LAKES CIR UNIT N207  
SANTA ROSA BEACH, FL 32459 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            OWNER  
Name            VILARDO, BRANSEN  
Address        16 W SHADY OAKS LN  
                  UNIT D  
City-State-Zip: SANTA ROSA BEACH FL 32459

*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:** BRANSEN VILARDO

**OWNER**

**02/02/2021**

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

\_\_\_\_\_  
Date