7/18/2017



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# Resubmission keep date of 7/18/17

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Corporate Filing Menu

Help

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## **FAX COVER SHEET**

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FROM	Kimberly Laughrey
DATE	2017-07-19 15:19:43 CST
RE	Resubmission Keep Date 7/18/17 EducationDynamics, LLC

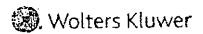
#### COVER MESSAGE

Resubmission Keep Date 7/18/17

Thank You,

Patrick Duffy
Associate Fulfillment Specialist
CT Corporation

Team (614) 280-3338 GlobalFulfillmentTeam@wolterskluwer.com



1209 N Orange Street Wilmington, DE 19801 www.wolterskluwer.com

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#### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN PLORIDA

IN COMPLIANCE WITH SECTION GOLGOO, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY

COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: EducationDynamics, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "Lal., C.," or "L.I.C.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "L.C.") 2. Delaware (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 4/17/12 (Dete first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0903, F.S. to determine penalty liability) 5 Marine View Plaza, Suite 212 Hoboken, NJ 07030 (Street Address of Principal Office) 5 Marine View Plaza, Suite 212 Hoboken, NJ 07030 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CT Corporation System Name: 1200 South Pine Island Road Office Address: Plorida 33324 Plantation. (City) Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. Maria T. Chambers C T Convoration System T. Shamber Special Assistant Secretary (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are; Aja Baxter, General Counsel, 5 Marine View Plaza, Suite 212, Hoboken, NJ 07030 Tom Wright, CFO, 5 Marine View Plaza, Suite 212, Hoboken, NJ 07030 Chuck Court, VP of Finance, 5 Marine View Plaza, Suite 212, Hoboken, NJ 07030 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized, (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) Signature of an authorized person This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Aja Baxter

Typed or printed name of signce

# Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "EDUCATIONDYNAMICS, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE SEVENTEENTH DAY OF JULY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Sign Sign

5701212 8300 SR# 20175274136

You may verify this certificate online at corp.delawara.gov/authver.shtml

Julitary W. Bildock, Sectiviary of State

Authentication: 202898110

Date: 07-17-17