

M80337

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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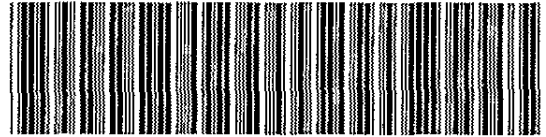
(Business Entity Name)

(Document Number)

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 822087 5124234

AUTHORIZATION : *Patricia Papp*

COST LIMIT : \$ 35.00

ORDER DATE : July 27, 2004

ORDER TIME : 9:22 AM

ORDER NO. : 822087-155

CUSTOMER NO: 5124234

CUSTOMER: Ms. Nancy Burns
Career Education Corporation
Suite 600
2895 Greenspoint Parkway
Hoffman Estates, IL 60195

CHANGE OF AGENT

NAME: INTERNATIONAL ACADEMY OF
MERCHANDISING & DESIGN, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER: _____

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: INTERNATIONAL ACADEMY OF MERCHANDISING & DESIGN, INC.
2. The principal office address: 5225 West memorial Highway, Tampa, FL 33634
3. The mailing address (if different): 2895 Greenspoint Pkwy., Suite 600, Hoffman Estates, IL 60195
4. Date of incorporation/qualification: May 11, 1988 Document number: M80337
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

C T Corporation System
1200 South Pine Island Road
Plantation, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company
1201 Hays Street
(P.O. Box NOT acceptable)
Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Maureen Cullen
(Signature of an officer or director)

Maureen Cullen, Attorney in Fact
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company
By Maureen M. Cullen
(Signature of Registered Agent)

July 23, 2004
(Date)

If signing on behalf of an entity:

Jacqueline M. Giles
(Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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