2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000003733

Entity Name: ARCHIMEDEAN ACADEMY INC.

FILED Oct 20, 2008 Secretary of State

y	ARCHINIEBE/NA/NO/NDEIMIT, INC.			
Current Principal Place of Business:		New Principal Place of Business:	New Principal Place of Business:	
6255 BIRD MIAMI, FL		12425 SW 72ND STREET MIAMI, FL 33183		
Current M	lailing Address:	New Mailing Address:		
12425 SW MIAMI, FL	72ND STREET 33183			
In accordan	: 02-0607904 FEI Number Applied For () ce with s. 607.193(2)(b), F.S., the corporation did n			
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agen	t:	
	IBIDES, ALECO ESQ. BRD AVENUE 33129 US			
	named entity submits this statement for the e of Florida.	ourpose of changing its registered office or registered age	nt, or both,	
SIGNATUI	RE: ALECO HARALAMBIDES			
	Electronic Signature of Registered Ag	ent Date		
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () Delete KAFKOULIS, GEORGE 12425 SW 72ND STREET MIAMI, FL 33183	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	VPD () Delete ALECO, HARALAMBIDES 12425 SW 72ND STREET MIAMI, FL 33183	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	D () Delete ALEXANDRAKIS, PLATON 12425 SW 72ND STREET MIAMI, FL 33183	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	SD () Delete CHRISTODOULOU, CHRISTODOULOS 12425 SW 72ND STREET MIAMI, FL 33183	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	D () Delete PEFKAROS, KYRIACOS 12425 SW 72ND STREET MIAMI, FL 33183	Title: D (X) Change () Addition Name: BERRIZBEITIA, FRANK Address: 12425 SW 72ND STREET City-St-Zip: MIAMI, FL 33183		
Title: Name: Address: City-St-Zip:	D (X) Delete ROUSSAKIS, GEORGE 12425 SW 72ND STREET MIAMI, FL 12425	Title: () Change () Addition Name: Address: City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGE KAFKOULIS PD 10/20/2008