

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000002664

Entity Name: CAMBRIDGE EDUCATION LLC

Current Principal Place of Business:

111 WOOD AVENUE SOUTH
ISELIN, NJ 08830-4112

Current Mailing Address:

111 WOOD AVENUE SOUTH
ISELIN, NJ 08830-4112 US

FEI Number: 20-3157028

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 MGR
Name HOWELLS, KEITH J
Address 8-10 SYDENHAM ROAD
City-State-Zip: CROYDON, SURREY SU CR0 2-EE

Title MGR
Name WILLIAMS, RICHARD
Address 8-10 SYDENHAM ROAD
City-State-Zip: CROYDON, SURREY SU CR0 2-EE

Title TREASURER
Name VELASQUEZ, J. CRAIG
Address 4301 HACIENDA DRIVE
SUITE 300
City-State-Zip: PLEASANTON CA 94588

Title SECRETARY
Name WHITE, DAVID P
Address 4301 HACIENDA DRIVE
SUITE 300
City-State-Zip: PLEASANTON CA 94588

Title PRESIDENT
Name HAQUANI, MAJID
Address 400 BLUE HILL DRIVE
SUITE 100, NORTH LOBBY
City-State-Zip: WESTWOOD MA 02090

Title MANAGER
Name COX, DAVID
Address LEVEL 2, FESTIVAL TOWER
DUBAI FESTIVAL CITY PO BOX 11302
City-State-Zip: DUBAI UNITED ARAB EMIRATES

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: MAJID HAQUANI

PRESIDENT

04/17/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date