## Requeste's Name 1310 Lewisville - Clemmons RD. Address Louisville, NC 27023 City/State/Zip Phone # 10000532558 +06/24/02-01057 \*\*\*\*\*\*35.00 \*\*\*\*\*

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

| 1.  |                |   |  |
|---|----------------|---|--|
| (Corporation Name)  |                | (Document #)  |  |
| 2.  |                |   | 02<br>NEC  |
| (Corporation Name)  |                | (Document #)  | ARE DE T   |
| 3.  |                |   | SSEI 6   |
| (Corporation Name)  |                | (Document #)  | च्या दे गा   |
| 4.  |                |   | 3: 23<br>STATE<br>OFFINE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE<br>STATE |
| (Corporation Name)  |                | (Document #)  |  |
| ☐ Walk in   | Pick up time _ |   | Certified Copy   |
| Mail out  | ☐ Will wait    | ☐ Photocopy [   | Certificate of Status  |
| NEW FILING  | <u>S</u>       | <u>AMENDMENTS</u>   |  |
| ☐ Profit ☐ Not for Profit ☐ Limited Liability ☐ Domestication ☐ Other |                | Amendment Resignation of R.A., Change of Registered Dissolution/Withdray Merger | l Agent  |
| OTHER FILINGS   |                | REGISTRATION/QUALIFICATION $\lambda^{\circ}$                                    |  |
| Annual Rep Fictitious N   |                | ☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other             | LIFICATION  Examiner's Initials  |



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 2, 2002

KAPLAN EARLY LEARNING COMPANY 1310 LEWISVILLE - CLEMMONS ROAD LEWISVILLE, NC 27023

SUBJECT: KAPLAN EARLY LEARNING COMPANY

Ref. Number: F00000004536

We have received your document for KAPLAN EARLY LEARNING COMPANY and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain Corporate Specialist

Letter Number: 202A00041889

02 JUL 16 AM 1: 45
DIVISION OF CORPORATIONS

## 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, the  |
|--|
| submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.  |
| 1. The name of the corporation: Kaplan Early Learning Company  |
| 2. The mailing address of the corporation: 1310 Lewisville-Clemmons Road   |
| Lewisville, NC 27023   |
| 3. Date of incorporation/qualification: 8-10-00 Document number: 56-6735286  |
| 4. The name and address of the current registered agent and registered office:   |
| CT Corporation System  |
| 1201 Peachtree Street, N.E Team 2 55 & U   |
| Atlanta, GA 30361  |
| 5. The name and address of the new registered agent (if changed) and /or registered office (if changed):   |
| Kaplan Tamara W. Loftis  |
| 10407 Centurion Parkway North Suite 102  |
| Jacksonville, FL 32256   |
| 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.   |
| Marky 18 may 6/6/02  |
| (Signature of an officer, chairman or vice chairman of the board) (Date)   |
| Matthew B. Marceron  |
| (Printed or typed name and title)  |
| Having been named as registered agent and to accept service of process for the above stated corporation, 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. |
| Signature of Registered Agent) (Date)  |
| If signing on behalf of an entity:   |
| Tamara W. Loftis agent (Capacity)  |
| (Appendict name) (Capacity)  |

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