## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F03000001923

City-St-Zip:

NEW YORK, NY 10018

Entity Name: TEACH FOR AMERICA, INC

FILED Jan 20, 2009 Secretary of State

| -   | ,  |   |   |  |
|---|--|---|---|--|
| Current Principal Place of Business:                    |  | New Principal Place of Business:  |   |  |
| 315 WEST 36TH STREET, SIXTH FLOOR<br>NEW YORK, NY 10018 |  | 315 WEST 36TH STREET, SEVENTH FLOOF<br>NEW YORK, NY 10018                           | 315 WEST 36TH STREET, SEVENTH FLOOR<br>NEW YORK, NY 10018 |  |
| Current Mailing Address:                                |  | New Mailing Address:  | New Mailing Address:                                      |  |
| 315 WEST 36TH STREET, SIXTH FLOOR<br>NEW YORK, NY 10018 |  | 315 WEST 36TH STREET, FIFTH FLOOR<br>NEW YORK, NY 10018                             |   |  |
|   | : 13-3541913 FEI Number Applied For ( )<br>ice with s. 607.193(2)(b), F.S., the corporation did n  | FEI Number Not Applicable ( ) Certificate of Status Do ot receive the prior notice. | esired (X)  |  |
| Name and  | Address of Current Registered Agent:   | Name and Address of New Registered Age  | nt:   |  |
| 11380 PROPALM BEA                                       | ATE CREATIONS NETWORK INC.  OSPERITY FARMS ROAD #221E  ACH GARDENS, FL 33410 US  named entity submits this statement for the e of Florida. | purpose of changing its registered office or registered ag                          | ent, or both  |  |
|   |  |   |   |  |
| SIGNATU   |  |   |   |  |
|   | Electronic Signature of Registered Ac  | ent Date  |   |  |
| OFFICERS AND DIRECTORS:                                 |  | ADDITIONS/CHANGES TO OFFICERS AND   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTO                 |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:             | P () Delete<br>KOPP, WENDY<br>315 WEST 36TH STREET 6TH FL<br>NEW YORK, NY 10018  | Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:                          |   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:             | S () Delete<br>MOURNING, PAUL<br>315 W 36TH STREET 6TH FL<br>NEW YORK, NY 10018  | Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:                          |   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:             | T () Delete<br>ZEITLIN, JIDE<br>315 W 36TH STREET 6TH FL<br>NEW YORK, NY 10018   | Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:                          |   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:             | AT () Delete<br>ROSSY, MIGUEL<br>315 WEST 36TH ST 6TH FL<br>NEW YORK, NY 10018   | Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:                          |   |  |
| Title:<br>Name:<br>Address:                             | C ( ) Delete<br>SEABROOK, DAVID<br>315 W 36TH STREET 6TH FL  | Title: ( ) Change ( ) Addition Name: Address:                                       |   |  |

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.

City-St-Zip:

SIGNATURE: KADISHA EDWARDS ASST 01/20/2009