Division of Corporations Electronic Filing Cover Sheet

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(((H15000074713 3)))



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BEFrom: S. A. Li

Division of Corporations

Fax Number : (850) 617-6380

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (830) 205-6842

Fax Number

: (850)878-5363

annual report mailings. Enter only one email address please.**

Email Address:

REGISTERED AGENT CHANGE AMPLIFY EDUCATION, INC.

Certificate of Status	0
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R. WHITE

Electronic Filing Menu

Corporate Filing Menu

Help

3/25/2015

https://efile.sunbiz.org/scripts/efilcovr.exe

COVER LETTER

TO:	TO: Amendment Section Division of Corporations							
STIR!	mer Am	plify Education, Inc.						
SUBJECT: Name of Corporation								
DOC	UMENT I	F04000003895 NUMHER:						
		atement of Change of Registered Office	Acoust and for our submitted for filing					
		- ·						
PICAS	e Leimin Wil	correspondence concerning this matter	to the following:					
		Richard Morris						
	Name of Contact Person							
	Amplify Education, Inc.							
	Firm/Company							
	55 Washington Street							
		Addre	ess ———————————————————————————————————					
	Brooklyn, NY 11201-1071							
	City/State and Zip Code kmcrtz@newscorp.com							
	E-mail address: (to be used for future annual report notification)							
For fi	ırther info	mation concerning this matter, please ca	uli:					
Bree !	Belmonte		212 590-9310					
	1	Name of Contact Person	Area Code & Daytime Telephone Number					
Enclo	sed is a \$3	5.00 check made payable to the Departm	nent of State.					
		Mailing Address: Amendment Section	Street Address: Amendment Section					
		Division of Corporations	Division of Corporations					
		P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle					
		: ununusaaveg 3 ಮ ವರ್ಷನ್ನೆ T	Taliahassee, FL 32301					

CR2E045 (01/12)

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

		7.0502, 617.0502, 607.1508, or (poration organized under the la		
		office or registered agent, or be	· · · · · · · · · · · · · · · · · · ·	
1. The name of	the corporation: Amplify I	Education, Inc.		
		gton Street, Brooklyn, NY 11201	-1071	
4. Date of incom	poration/qualification: 07	/09/2004 Document	number: F040000038	195
5. The name an		rent registered agent and register		
	CORPORATION SERVICE	CE COMPANY		
	1201 HAYS STREET TA	LLAHASSEE, FL 32301-2525		
6. The name an (if changed):		registered agent (if changed) ar	nd /or registered office	• 5
		10000 0 0 10 10 10		
	Do C I Corporation Syste	m, 1200 South Pine Island Road P.O. Box NOTacceptable		\$ 5
	Pluntation, Florida 33324			25
		and the street address of the bu		
Such change wanthorized by (as authorized by resolution he board, or the corporation.	on duly adopted by its board of con has been notified in writing	directors or by an offi of the change.	icer so
- RU	्र कि का नाहिए का विश्वस्था	Richard Morris		
I hereby accept I further agree performance of agent. Or, if th hereby confirm		tered agent and agree to act in ions of all statutes relative to th liar with and accept the obligat merely to reflect a change in to been notified in writing of this t	ed or typed name and tale this capacity, he proper and comple tion of my position as he registered office a change.	ile registered ddress, I
By: Yau	pature of Registered Agent	3	-24-2015	
If signing on be	chalf of an entity: antha Jones	Corporation Syst	em.	
		* FILING FEE: \$35.00 * * *		

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

CR2E045 (03/12)