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TRANSMITTAL LETTER

	Registration Section Division of Corporations		
SUBJEC	CT: College Planning Services, Inc.		
		ı - must include suffix)	
Dear Sir o	or Madam:	-	
"Certifica	osed "Application by Foreign Corporation for A ate of Existence," and check are submitted to re ousiness in Florida.		
Please ret	turn all correspondence concerning this matter	to the following:	
Roger Ma	anning		
	(Name of	Person)	
Banyan F	Printing		
	(Firm/Cor	npany)	
128 Sout	th Dixie Highway		
	(Addr	ess)	
Lake Wo	orth, Florida 33460		
	(City/State a	nd Zip code)	
For furthe	er information concerning this matter, please concerning this matter, please concerning this matter.	ali:	•
Roger Ma	anning at (561	714-0531	
(Code & Daytime Telephone	Number)
S	STREET ADDRESS:	MAILING ADDR	ESS:
	Registration Section Registration Section		
	Division of Corporations 409 E. Gaines St. Division of Corporations P.O. Box 6327		rations
	Tallahassee, FL 32399	Tallahassee, FL 3	2314
Enclosed	is a check for the following amount:		
570.0	00 Filing Fee	\$78.75 Filing Fee & 2 Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

 College Plan 	ning Services, Inc.		
(Enter name o	f corporation; must include "INCORPORAT" "Corp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"	
	· -		
(If name unav	ailable in Florida, enter alternate corporate na	me adopted for the purpose of transacting business	s in Florida)
2. Deleware	•	3 20-2383965	
	ry under the law of which it is incorporated)	(FEI number, if applicable)	
4, 02/22/05		5 Perpetual	
(D	ate of incorporation)	(Duration: Year corp. will cease to exist or "	perpetual")
6. None	1		
		as in Clasida if anian to anniatuation	······································
	(Date first transacted busine		
	(SEE SECTIONS 607.1501 & 60	7.1502, F.S., to determine penalty liability)	
7. 42 Reads Wa	(SEE SECTIONS 607.1501 & 60 New Castle Deleware 19720	7.1502, F.S., to determine penalty liability)	
• • • • • • • • • • • • • • • • • • •	(SEE SECTIONS 607.1501 & 60 y New Castle Deleware 19720 (Principal office	7.1502, F.S., to determine penalty liability) address)	
• • • • • • • • • • • • • • • • • • •	(SEE SECTIONS 607.1501 & 60 y New Castle Deleware 19720 (Principal office xie Highway Lake Worth Florida 3346)	7.1502, F.S., to determine penalty liability) address)	
• •	(SEE SECTIONS 607.1501 & 60 y New Castle Deleware 19720 (Principal office	7.1502, F.S., to determine penalty liability) address)	
128 South Di	(SEE SECTIONS 607.1501 & 60 y New Castle Deleware 19720 (Principal office xie Highway Lake Worth Florida 3346)	7.1502, F.S., to determine penalty liability) address)	05
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128 South Di 8. Processing (Purpos 9. Name and st Name:	(SEE SECTIONS 607.1501 & 60 New Castle Deleware 19720 (Principal office xie Highway Lake Worth Florida 3346) (Current mailing e(s) of corporation authorized in home state of reet address of Florida registered agent: Roger Manning	7.1502, F.S., to determine penalty liability) address) address) address)	MM 28
128 South Di 8. Processing (Purpos 9. Name and st	(SEE SECTIONS 607.1501 & 60 New Castle Deleware 19720 (Principal office xie Highway Lake Worth Florida 3346) (Current mailing e(s) of corporation authorized in home state of reet address of Florida registered agent: Roger Manning	7.1502, F.S., to determine penalty liability) address) address) address)	Hng 28 PH 8:

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 obligations of my position as registered agent.

(Registered agent's signature)

- 11. Attached is a certificate of existence dely authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and business addresses of officers and/or directors:

A, DIKE	CTORS
Chairman:	Roger Manning *
Address:	128 South Dixie Highway Lake Worth Florida 33460
Vice Chair	man: _'
Address: _	
_	
Director:	
_	
Director:	
riduioss.	
B. OFFI	CERS
President:	Roger Manning
	128 South Dixie Highway Lake Worth Florida 33460
Vice Presid	dent: Roger Manning
	128 South Dixie Highway Lake Worth Florida33460
_	
Secretary:	Roger Manning
•	128 SouthDixie Highway Lake Worth Florida 33460
Treasurer:	Roger Manning
	128 South Dixle Highway Lake Worth Florida 33460
11001000.	
NOTE: 1	f necessary, you may attach an addendum to the application listing additional officers and/or directors.
13	percue)
	(Signature of Director or Officer listed in number 12 of the application)
14. Roge	er Manning, President
	(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COLLEGE PLANNING SERVICES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF MARCH, A.D. 2005.



Harriet Smith Windson, Secretary of State

AUTHENTICATION: 3735794

DATE: 03-10-05

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