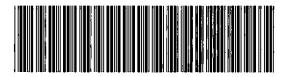


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COVER LETTER

TO: New Filing Section Division of Corporations	
Model Discounting of Education due	
SUBJECT: Multi-Dimensional Education Inc. Name of corporation - must include suffix	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Michael W. Corrigan	
Name of Person	
Multi-Dimensional Education Inc.	
Firm/Company	
2600 S. 3Bs & K Road	
Address	
Galena, Ohio 43021	
City/State and Zip code	
mike@mdedinc.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call: ARRY ARRY	
Michael W. Corrigan 47 304 \ 690-5868 \ \frac{157}{120} \ \frac{1}{120} \ \fra	
Name of Person Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount: 1037. 50 = \$750 + \$7.50 \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certificate of Status	fe in
Enclosed is a check for the following amount: 1037. 50 = \$750 + \$7.50	1
\$70.00 Filing Fee \$78.75 Filing Fee & Certified Copy \$78.75 Filing Fee & Certified Copy Certified Copy Certified Copy	10 de 84

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.

North Caroli	•		adopted for the purpose of transacting busi	iness in F	lorida)
North Carolin (State or country	under the law of which it is incorporated)	_ 3.	26-2009007 (FEI number, if applicable		.
02-18-2008		5	perpetual		
	e of incorporation)	٥.	(Duration: Year corp. will cease to exist	ог "регре	tual")
September	2008				
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
366 Rolla \	/ista Drive, Boone, NC 2860		702, 1.5., to determine penalty hability)		
JOO Della	(Principal office		ress)		
2600 S 31	Bs and K Road, Galena, O		•		
2000 0. 0.	(Current mailing				
	n of Education and Education s) of corporation authorized in home state of		al Professional Developmer puntry to be carried out in state of Florida)	nt	
Name and stre	et address of Florida registered agent: ((P. C). Box NOT acceptable)	E SE	2011
				₽ ₩	2011 DEC -7
Name:	Judith Lamb				
Name:				IASSI	-7
	1036 US Highway 1, #416			SECRETARY BE ALLAHASSEE, F	
Name:	1036 US Highway 1, #416 North Palm Beach		, Florida 33408 (Zin code)	TARY BE STA	
Name:	1036 US Highway 1, #416		, Florida 33408	TARY BE STATE	-7 AM III: 46
Name: Office Address:	1036 US Highway 1, #416 North Palm Beach (City) gent's acceptance:		, Florida 33408 (Zip code) ce of process for the above stated corpo	er John Mark	AM III: 46

11. Attached is a certificate of existence duly 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. DIRECTORS Chairman: Address: ___ Vice Chairman: Address: Address: _ Director: _ Address: _ **B. OFFICERS** President: Dr. Doug Grove Address: 3001 Redhill Avenue B6, Suite 207, Costa Mesa, CA 92626 Vice President: Dr. Michael W. Corrigan Address: 2600 S. 3Bs and K Road, Galena, Ohio 43021 Secretary: Dr. Philip Vincent Address: 366 Bella Vista Drive, Boone, NC 28607 Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Michael W. Corrigan, UP Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 14. Michael W. Corrigan, Vice President



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

MULTI-DIMENSIONAL EDUCATION, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 18th day of February, 2008, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 5th day of December, 2011.

Certification# 92103072-1 Reference# 10772990- Page: 1 of 1 Verify this certificate online at www.secretary.state.nc.us/verification Secretary of State

6 Jaine I Marshall