6/9/2020

Division of Corporations



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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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REGISTERED AGENT CHANGE SCHOOLOGY, INC.

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

statement of ch	provisions of sections 607.0502, 6 ange is submitted for a corporation er to change its registered office or	organized under the laws of the	State of Delaware	
		registerea agent, or both, in the	State of Pioriaa.	
1. The name of	the corporation: Schoology, Inc.			···
2. The principa	l office address: 560 Lexington Avc	FL 7, New York, NY 10022-6946		· · · · · · · · · · · · · · · · · · ·
·····			• • • • • • • • • • • • • • • • • • • •	
3. The mailing	address (if different): 150 Parkshore	Dr, Folsom, CA 95630		
4. Date of incom	rporation/qualification: 02/19/2016	Document number:	F16000000761	
	ad street address of the current regis		on file with the	
	CORPORATION SERVICE COMI	PANY		-
	1201 HAYS STREET			202
	TALLAHASSEE, FL 32301-2525			
6. The name an (if changed):	od street address of the new register	ed agent (if changed) and /or reg	istered office	-9 áí 9:
٠.	c/o C T Corporation System, 1200 S	South Pine Island Road		50
	P.O. E	Box NOT acceptable		
	Plantation, Florida 33324		•	
The street addr as changed wil	ress of its registered office and the II be identical.	street address of the business of	ffice of its register	red agent.
Such change wauthorized by	as authorized by resolution duly a the board, or the corporation has be	dopted by its board of directors een notified in writing of the ch	or by an officer sange.	0
Philip Ro	admilovic	Philip Radmilovic	•	
I hereby accept further agree performance o agent. Or, if it hereby confirm CTCo	Section an other or director If the appointment as registered ago to comply with the provisions of a firm duties, and I am familiar with his document is being filed merely in that the corporation has been not provided System Is Rufen Blanchette.	i una accepi the obligation of m to reflect a change in the regist	acity. r and complete y position as regis	stered
Si	grature of Registered Agent	Date	2	 .
lf signing on b	ehalf of an entity:			
	Chantalle Rufen-Blanche	ette, Assistant Secretary		
•		NG FEE: \$35.00 * * *		

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

*CR2E045 (03/12)