

F170000194

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

6540

W17-16331

800

2017 FEB 28 PM 3:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office Use Only



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02/24/17--01002--017 **70.00

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03/15/17--01001--005 **800.00

MAR 14 2017

S. YOUNG

17 FEB 24 PM 1:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 24, 2017

LEGAL DEPARTMENT
ONCOURSE LEARNING CORPORATION
20225 WATER TOWER BLVD 4TH FLOOR
BROOKFIELD, WI 53045

SUBJECT: ONCOURSE LEARNING CORPORATION
Ref. Number: W17000016331

We have received your document for ONCOURSE LEARNING CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$800.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 517A00003657

17 FEB 24 PM 1:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OnCourse Learning Corporation

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:
Legal Department

_____ OnCourse Learning Corporation	Name of Person
_____ 20225 Water Tower Blvd, 4th Floor	Firm/Company
_____ Brookfield, WI 53045	Address
_____ abridgewater@oncourselearning.com	City/State and Zip code
_____ E-mail address: (to be used for future annual report notification)	

17 FEB 24 PM 1:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Alexandra Bridgewater	262	565-5215
_____ Name of Person	at (_____) Area Code	_____ Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

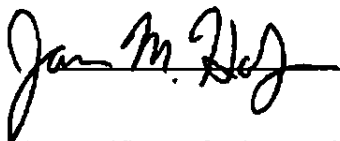
*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. OnCourse Learning Corporation
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 208492285
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 2/20/2007 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)
6. 1/1/15
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 20225 Water Tower Blvd, 4th Floor, Brookfield, WI 53045
(Principal office address)
- Same as above.
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: CT Corporation System
- Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

9. 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.

James M. Halpin
Assistant Secretary



(Registered agent's signature)

10. 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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 FEB 24 PM 1:47

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Patrick Sheahan

Address: 20225 Water Tower Blvd, 4th Floor, Brookfield, WI 53045

Director: _____

Address: _____

B. OFFICERS

President: Patrick Sheahan

Address: 20225 Water Tower Blvd, 4th Floor, Brookfield, WI 53045

Vice President: Matthew Geske

Address: 20225 Water Tower Blvd, 4th Floor, Brookfield, WI 53045

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.  _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. Matthew Geske, Vice President

(Typed or printed name and capacity of person signing application)

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STATE OF WISCONSIN
DEPARTMENT OF STATE
RECEIVED

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ONCOURSE LEARNING CORPORATION" 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 FIRST DAY OF FEBRUARY, A.D. 2017.

STUART COUNTY, NC
CALLAHAN, SEPT. 11, 2017
17 FEB 24 PM 1:47




Jeffrey W. Bullock, Secretary of State

4304183 8300

SR# 20170435864

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 201965195

Date: 02-01-17