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(Re	questor's Name)			
(Ad	dress)			
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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#### COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: PRODIGY LEARNING (US) 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:

#### ANDREW LILLIS

Name of Person

#### JOHN MURPHY & ASSOCIATES PC

Firm Company

171 MADISON AVE STE 305

Address

NEW YORK NY 10016

City State and Zip code.

### MARK.REID@PRODIGYLEARNING.COM

I-mail address, (to be used for future annual report notification)

For further information concerning this matter, please call

ANDREW LILLIS

at ( 646 ) 9195720 Area Code Daytime

Name of Person

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahussee, FL 32303

MAILING ADDRESS:

Registration Section Division of Corporations

P.O. Box 6327

Fallahassee, FL 32314

Enclosed is a cheek for the following amount

Please make check payable to FLORIDA DEPARTMENT OF STATE

1. \$70.00 Filing Fee

\$78.75 Filing Fee & Certificate of Status

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 60° 1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

	able in Horida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)	
DELAWARE 3.		320630877	
	y under the law of which it is incorporated)	(111 number, it applicable)	
05/20/20	20 ,		
(Date of incorporation)		(Date of duration) if other than perpetual)	
·			
	(Date first transacted business if (SEE SECTIONS 607.1501 & 607.15	i Florida, if prior to registration) 502, F.S., to determine penalty liability (	
8 THE GR	EEN STE 4000, DOVER DE	·	
	- · · · <del></del>	ce street address)	
	(Current mailin	g address, () different)	
	C arrent mailin		
Name and <u>stre</u>	(Current mailin e <u>t address</u> of Florida registered agent (P.C	g address, () different)	
		g address, () different)	
Name	e <u>l address</u> of Florida registered agent. (P.C Registered Agents Inc.	g address, () different)  2. Box NOT acceptable)	
Name	er address of Florida registered agent (P.C Registered Agents Inc. 7901 4th St N STE 300	g address, () different)  2. Box NOT acceptable)	
Name	Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg	g address, it differenti  ). Box NOT acceptable)  Florida 33702	
Name	er address of Florida registered agent (P.C Registered Agents Inc. 7901 4th St N STE 300	g address, () different)  2. Box NOT acceptable)	
Name Office Address:	Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg	g address, it differenti  ). Box NOT acceptable)  Florida 33702	
Name Office Address: Registered ag Javing been nan	Per address of Florida registered agent (P.C.) Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) ent's acceptance: like as registered agent and to accept service.	g address, () different)  2. Box NOT acceptable)  Florida 33702  (/ip code)  Ce of process for the above stated corporation at the	
Name Office Address: Registered ag laving been nan esignated in this	Registered Agents Inc.  7901 4th St N STE 300  St. Petersburg  (City)  ent's acceptance:  ned as registered agent and to accept service application, I hereby accept the appointm	g address, it different)  ). Box NOT acceptable)  Florida 33702  (/ip code)  ce of process for the above stated corporation at the ment as registered agent and agree to act minimis capa	
Name Office Address: Registered ag Javing been nan esignated in this arther agree to c	Registered Agents Inc.  7901 4th St N STE 300  St. Petersburg  (City)  ent's acceptance:  red as registered agent and to accept service application, I hereby accept the appointm omply with the provisions of all statutes re	g address, it differents  2. Box NOT acceptable)  Florida 33702  (/ip code)  ce of process for the above stated corporation at the ment as registered agent and agree to act furthis capacitative to the proper and complete performance of negative to the proper and complete performance of negative to the proper and complete performance.	
Name Office Address:  Registered ag laving been nan esignated in this orther agree to c	Registered Agents Inc.  7901 4th St N STE 300  St. Petersburg  (City)  ent's acceptance:  ned as registered agent and to accept service application, I hereby accept the appointm	g address, it differents  2. Box NOT acceptable)  Florida 33702  (/ip code)  ce of process for the above stated corporation at the ment as registered agent and agree to act furthis capacitative to the proper and complete performance of negative to the proper and complete performance of negative to the proper and complete performance.	
Name Office Address:  Registered ag laving been nan esignated in this orther agree to c	Registered Agents Inc.  7901 4th St N STE 300  St. Petersburg  (City)  ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointm omply with the provisions of all statutes rewith and accept the obligations of my positions.	See of process for the above stated corporation at the seent as registered agent and agree to act much sition as registered agent.	
Name Office Address: Registered ag Javing been nan esignated in this arther agree to c	Registered Agents Inc.  7901 4th St N STE 300  St. Petersburg  (City)  ent's acceptance:  red as registered agent and to accept service application, I hereby accept the appointm omply with the provisions of all statutes re	See of process for the above stated corporation at the seent as registered agent and agree to act much sition as registered agent.	

under the law of which it is incorporated.

	Name ANDREW FLOOD		MARK REID
Chairman	Address 8 THE GREEN STE 4000	. Сћантан	Name
Vice Chairman		"Vice Chairman	Address 8 THE GREEN STE 4000
<b>√</b> Director	DOVER DE 19901	<b>✓</b> Director	DOVER DE 19901
.President		President	
Vice President		Vice President	
Secretary	Treasurer	Secretary	Treasurer
Other	. (nher	Other	_ Other
Claiman	Name	Charman	Name
Vice Chairman	Address	Vice Chairman	Address
Director		Director	-
President		President	
Vice President	- <del></del>	Vice President	
Secretary	[m.sum	Secretary	Ireasurer
Other		To other	Other
Charman	Name	Chairman	Name
Vice Chairman	Address	Vice Chairman	Address
Director		Director	
President	<del></del>	President	
Vice President		Vice President	
Secretary	Lieasurer	Secretary	. Freasurer
Other		Other	Other
mp <u>ortant No</u> tice, Undividuals may be .	se an attachment to report more than six (6). The attached to the index when filing your Florida Departm  L. M	ent of State Annual Rep	on lone

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

13 MARK REID



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT "PRODIGY LEARNING (US) INC." IS

DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN

CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW

AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF INCORPORATION, FILED THE TWENTIETH DAY OF MAY,

A.D. 2020, AT 11:25 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATE IS THE ONLY PAPER OF RECORD, THE CORPORATION IN

QUESTION NOT HAVING FILED AN AMENDMENT NOR HAVING MADE ANY

CHANGE WHATSOEVER IN THE ORIGINAL CERTIFICATE AS FILED.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

e at coro delaware gov/aut

Authentication: 204285667

Date: 09-29-21