## F93000003574

(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phone #	<del>(</del> #)
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	<del></del>
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SECRETARY OF STATE TALLAHASSEE, FLORIDA



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

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To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: May 8, 2015

Order#: 605871-018

Re: OMBUDSMAN EDUCATIONAL SERVICES LTD

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Lindsey Lockard

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX\_\_\_\_ Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of che	ange is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes organized under the laws of the State of Illinois	, this	_
		registered agent, or both, in the State of Florida.		
		UCATIONAL SERVICES, LTD., INC.		
	office address: H MILWAUKEE AVE. SUITE 2, LIE	BERTYVILLE, IL 60048		
3. The mailing a	address (if different):		<del></del>	
4. Date of incor	poration/qualification: 08/05/1993	Document number: F93000003574		
	d street address of the current register rtment of State: (If resigned, enter re	ered agent and registered office on file with the esigned)		
	C T CORPORATION SYSTEM			
	1200 SOUTH PINE ISLAND ROAD		5	SEC
	PLANTATION	FL 33324	HAY	4844 4330
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			2 PH	VRY OF S
	Corporation Service Company			STATE
	1201 Hays Street		_	A
	P.O. Bo Tallahassee	ox NOT acceptable  FL 32301		
	- alianassee	1		
The street addr as changed wil	ess of its registered office and the s I be identical.	street address of the business office of its registe	ered age	ent,
Such change w authorized by t	as authorized by resolution duly ad he board, or the corporation has be	opted by its board of directors or by an officer en notified in writing of the change.	so	
$\mathcal{A}$	Dona Priebe, Vice President			
Sy, nati	ure of seafficer or director	Printed or typed name and title		_
I further agree performance of agent. Or, if the hereby confirm	to comply with the provisions of al f my duties, and I am familiar with a	nt and agree to act in this capacity. It statutes relative to the proper and complete and accept the obligation of my position as reg o reflect a change in the registered office addre fied in writing of this change.	istered ess, I	
By: X	05/07/2015			
Sı	gnature of Registered Agent	Date		
If signing on bo	ehalf of an entity:			
Grace E. Kirby	, Asst. Vice President			
	Typed or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

\* \* \* FILING FEE: \$35.00 \* \* \*