

October 4, 2000

FLORIDA SECRETARY OF STATE P. O. Box 6327 Tallahassee, FL 32314

600003419376--7 -10/09/00--01086--017 \*\*\*\*\*35.00 \*\*\*\*\*\*35.00

Attn: Corporate Filing Dept.

llanie Case

Re: SYLVAN LEARNING SYSTEMS, INC.

Dear Filing Clerk:

Enclosed please find a Statement of Change of Registered Office/Agent, for the above referenced name, which is to be filed in your office. I have enclosed check # 5455 in the amount of \$ 35.00 for the filing fee. After filing please return to me the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please contact me at 800-472-0544.

Thank you,

Delanie Case

enclosures

OD OCT -9 AM II: 41
SECREMARY OF STATE

P.O. Box 1831 Austin, Texas 78767 (800) 345-4647

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

the undersig	to the provisions of sections 607.0502, 617.0502, 607.1508, igned corporation organized under the laws of the State of Ma e following statement in order to change its registered office	aryland
the State of I	f Florida.	or registered agent, or boin, in
1. The name	ne of the corporation is: SYLVAN LEARNING SYSTEMS, INC.	
2. The maili	ling address of the corporation is: 1000 Lancaster, Baltimore, M	1D 21202
3. Date of in	incorporation/qualification: 7/14/94 Document	nt number: 9400000367
4. The name	e and address of the current registered agent and office:	
	NRAI Services, Inc.	
	526 East Park Avenue	
	Tallahassee, FL 32301	700
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)		ox Not Acceptable
Capitol Corporate Services, Inc.		
	1333 North Duval	
-	Tallahassee, FL 32303	
The street ad	address of its registered office and the street address of the bu	usiness office of its few stered
authorized by	re was authorized by resolution duly adopted by its board of by the board.	directors or by an officer so
- flet	ature of an officer, chairman or vice chairman of the board)	x Soit 29, 2000
		(Date)
	(Printed or typed name and title)	
Having been corporation, I further agre performance registered ag	n named as registered agent and to accept service of process a, I hereby accept the appointment as registered agent and a ree to comply with the provisions of all statutes relative to the e of my duties, and I am familiar with and accept the obligat agent.	s for the above stated gree to act in this capacity. ne proper and complete tion of my position as
Delan	Capitol Corporate Services, Inc.	D-11. NA
<u> </u>	(Signature of Registered Agent) X	D-4-00 Date)
If signing on bel	pehalf of an entity:	
Delanie Case		<b>.</b>
	(Typed or Printed Name)	(Capacity)
	* * * FILING FEE: \$35.00 * * *	
CR2E045(7/97)		

P.O. Box 6327

TALLAHASSEE, FL 32314

DIVISION OF CORPORATIONS