

TALLAHASSEE, FLORIDA

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Estimated Charge

Fax Number

: (850)205-0383

From:

Account Name

: NATIONS BUSINESS CENTER, INC.

Account Number : 120000000238 Phone

: (305)591-9448

Fax Number

: (954)753-3447

LIMITED LIABILITY COMPANY

VIRTUAL CAMPUS, LLC

ertificate of Status	0
ertified Copy	1
age Count	n

\$155,00



JIVISION OF CORPORATION

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ARTICLES OF ORGANIZATION OF FLORIDA LIMITED LIABILITY
COMPANY

CELEBRATION STATE TALLAHASSEE, FLORIDA

ARTICLE I- Name: Virtual Campus, LLC

ARTICLE II – Address: 2520 NW 97th Avenue Suite 230 Miami, FL 33172 MAILING ADDRESS!
2520 NW 99TH AVELUE STE 230
MILY TL 33172

ARTICLE III- Registered Agent, Registered Office, & Registered Agent's Signature:

Names:

Jorge Ignacio Schulman

2520 NW 97th Avenue Suite 230 Florida Street address

Miami, FL 33172 City, State and Zip

Having been named as registered agent and to accept service of process for the above state limited liability company at the placed designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature

(An additional article must be added if an effective date is requested)

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TALLAHASSEE, FLORIDA

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3) Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

> Rebeca Anijovich Typed or printed name of signee

> > (H030000312238)