

**2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000053371

**FILED  
Oct 04, 2011  
Secretary of State**

**Entity Name:** INSTITUTE OF PROFESSIONAL LEARNING, LLC

**Current Principal Place of Business:**

500 CYPRESS CREEK ROAD  
SUITE 390  
FT. LAUDERDALE, FL 33309 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 680190  
MARIETTA, GA 30068 US

**New Mailing Address:**

**FEI Number:** 26-2741420      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: RUFUS BENTON

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: RODGERS, RICHARD R  
Address: 1481 KING DOWN CIRCLE  
City-St-Zip: DUNWOODY, GA 30338 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RUFUS BENTON

CFO

10/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date