

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000083665

**FILED**  
**Nov 29, 2011**  
**Secretary of State**

**Entity Name:** DEAL MAKER EDUCATION, LLC

## **Current Principal Place of Business:**

15880 SUMMERLIN RD  
# 300-106  
FT MYERS, FL 33908 US

## **New Principal Place of Business:**

4818 CORONADO PKWY  
STE 9  
CAPE CORAL, FL 33904 US

## **Current Mailing Address:**

15880 SUMMERLIN RD  
# 300-106  
FT MYERS, FL 33908 US

## **New Mailing Address:**

4818 CORONADO PKWY  
STE 9  
CAPE CORAL, FL 33904 US

**FEI Number:** 27-0836322

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORP DIRECT AGENT, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 US

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

TREFETHEN, WILLIAM T  
4818 CORONADO PKWY  
STE 9  
CAPE CORAL, FL 33904 US

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: WILLIAM TREFETHEN

11/29/2011

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** GLOBAL EDUCATION MANAGEMENT, LLC  
**Address:** 4818 CORONADO PKWY #9  
**City-St-Zip:** CAPE CORAL, FL 33904 US

**Title:** CFO  
**Name:** TREFETHEN, WILLIAM T  
**Address:** 4818 CORONADO PKWY, STE 9  
**City-St-Zip:** CAPE CORAL, FL 33904 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: WILLIAM TREFETHEN

CFO

11/29/2011

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