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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Art Smart Learning Centers, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mary S. Fidler

Name of Person

Art Smart Learning Centers, LLC

Firm/Company

1900 Main Street, Suite 750

Address

Sarasota, FL 34236

City/State and Zip Code

msarteacher@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary S. Fidler

Name of Person

at (843) 290-3755

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

MAILING ADDRESS: Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

INHS18 (5/08)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Art Smart Learning Centers, LLC

2.(a)	Principal office address of limited liability compan	V: 1900 Main Street	Do:	20	_
(,	(Note: MUST BE STREET ADDRESS)	Suite 750		13	_
		Sarasota, FL 34236	≥ F	AL	
			いた	5	
(b)) Mailing address of limited liability company:	1900 Main Street	SS.	2	. —
、 - /	(Note: MAY BE POST OFFICE BOX)	Suite 750		ω	m
	₹	Sarasota, FL 34236		>	. 'n
			S	H	\sim
05/28/2	013	L13000076591	OR A	☴	-
3. Da	ate of filing/registration in Florida	4. Document number	DAE	8	

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Registered Office Address:

Mary S. Fidler

8521Vamo Road Sarasota, FL 34231

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

<u>NEW</u> Registered Agent:

<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)

Sarasota	FL 34236
Suite 750	
1900 Main Street	

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member authorized representative of a member

Mary S. Fidler

Printed or typed name of signee

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 relative 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. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered A

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (05/08)