12/4/24, 4:50 PM

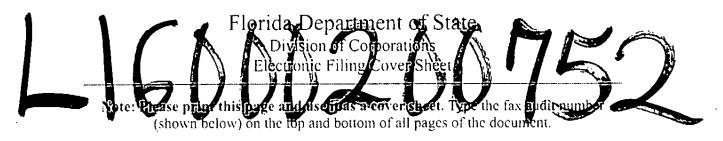
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From: James Tanks

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338

Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future; annual report mailings. Enter only one email address please.

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M. SOLOMON DEC - 5 2024

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Corporate Filing Menu

Help

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. Na	nme of the limited liability company: PRIME EDUCA	TION, L	LC				
2. (a)		í	(b)				
. (,	Principal office address of finited hability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	360 Park Ave South, 17th Floor	360 Park Ave South, 17th Floor					
	New York, NY 10010		New York, NY 10010				
	11/02/2016		L160002007	752			
3.	Date of filing/registration in Florida	- 4.		Document nun	nber		
. .							
5. (a)	Registered Agent and Registered Office shown on the records of	the Flori	da Dept. of State	- e:			
	Florida Filing & Search Services, Inc.		,				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	3.5)	-			
	155 Office Plaza Drive				11.12	2024	
	TALLAHASSEE FL	-	•	2024 DEC	ر بست. در چون		
			• •	_	[# <u>-</u>]	투	g water
(b)	Enter name of NEW Registered Agent and/or NEW Registered			_		PM	
	Enter name of NEW Registered Agent and/or NEW Registered	l Office a	ddress:		بن ۳	<u>:</u> ==	
	C T Corporation System				F120	: 26	_
	NEW Registered Office Address:	-					
	1200 South Pine Island Road			_			
	Plantation	33324					
the cha agent v was/we the arti Signa I here provisi the obti to mer	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of icles of organization or the operating agreement of the light of a member or authorized representative of a member by accept the appointment as registered agent and agions of all statutes relative to the proper and complete light on the profession of my position as registered agent as provide ely reflect a change in the registered office address. If d in writing of this change. C T Corporation System	f the regiability (of the li limited Ka	eistered office company, it is mited liability l'liability con ra Korosec, A	e and the busines hereby confirm y company or a support of the property of the	ess office of med that the sotherwise entative name of signer	f the ree chan e provi	egistered gc(s) ded in
3y:	While Fibian	٠					
Signatu	re of Registered Agent Michele Holden, Asst. Secre	etary					