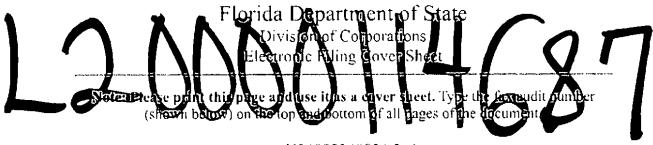
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Division of Corporations

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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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LLC REGISTERED AGENT CHANGE MS LEARNING LLC

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M. SOLOMON

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

Pursuant to the provisions of sections 605.0111 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.

I. Na	ame of the limited liability company: MS LEARNING	LLC					
2. (a)	561 PEARL HARBOR DRIVE	(b)	561 PEAR	RL HARBOR D	RIVE		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	```		Mailing address o (Note: MAY B			•
	DAYTONA BEACH, FL 32114		DAYTON	A BEACII. FL	32114		
	04/28/2020		L20000114	687			
3.	Date of filing/registration in Florida	4.		Document nu	ımber		
5. (a)	Tason Schappert Registered Agent and Registered Office shown on the records of	Cale o El acida	Dans at State	_			
	1010 8th Ave South	we rionaa	Dept of State	e e			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	<u> </u>	_			
				<u>-</u>	(1)	20:	
	Naples, FI	34102		_		24 00	zar y są
(b)	C T Corporation System				22.7	1024 OCT 21	ا ا اختلام اختلام
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office add	iress:	_	SOFT ST	PM :	
	NEW Registered Office Address:	-		_		0	
	1200 South Pine Island Road			_			
	Plantation F1	33324					
the cha agent was 'wa the art	imited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited here authorized by an affirmative vote of the members igles of organization or the operating agreement of the	f the regis lability co of the lim c limited l	tered office mpany, it i ited liabilit	e and the husir s hereby confi y company or upany.	ness office o rmed that th as otherwise	f the re e cham e provid	gistered zv(s)
-	ture of a mappier or authorized representative of a member by accept the appointment as registered agent and ag	rree to act	in this can	• •	ŭ		cith the
provisi the obi to mer	ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d'in writing of this change.	e performe ed for in C	ince of my Hanier 602	duties, and Lo 5. F.S. Or. if to	m familiar v his documen	vith and Tis hei	d accept no filed
By:	C'T Corporation System Sea SEA	IN L. EMERIC	k, assistant	SECRETARY			