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660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

ON COMPUTER EDUCATION SERVICES, LLC (Name of foreign	n lin	nited liability company)	
DELAWARE furisdiction under the law of which foreign limited liability ompany is organized)		APPLIED FOR  ( FEI number, if applicable)	
NOVEMBER 16, 2001 (Date of Organization)	5.	PERPETUAL  (Duration: Year limited liability company will exist or "perpetual")	cease to
UPON QUALIFICATION (Date first transacted business in Florida. (S 5200 TOWN CENTER CIRCLE, SUITE 470, BOCA RA		ections 608.501, 608.502, and 817.155, F.S.) N, FL 33486	<b>-</b> -
(Street addre	ss o	f principal office)	
If limited liability company is a manager-manage	ed c	ompany, check here 🗷	SECRE ALLAH
The usual business addresses of the managing me	emb	pers or managers are as follows:	HASSE
RODGER R. KROUSE, MANAGER, 5200 TOWN CEN	ITE!	R CIRCLE, SUITE 470, BOCA RATON, FL 334	186 <sup>-1</sup> 0
MARC J. LEDER, MANAGER, 5200 TOWN CENTER	CIR	CLE, SUITE 470, BOCA RATON, FL 33486	STAFE
Attached is an original certificate of existence, no more than jurisdiction under the law of which it is organized. (A photox aslation of the certificate under oath of the translator must be s	юру	is not acceptable. If the certificate is in a foreign lar	istody of iguage, a
1. Nature of business or purposes to be conducted			ΙΥ
mann			
(In accordance with section 608.408(3	), F.S	horized representative of a member.  S., the execution of this document constitutes ry that the facts stated herein are true.)	

Typed or printed name of signee

MARC J. LEDER, MANAGER

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The r	name of the L	imited Liability	Company is:			
Sun Com	nputer Education	n Services, LLC				

2. The name and the Florida street address of the registered agent and office are:

	(Name)	
c/o C T Corporation Sy	stem, 1200 South Pine Island Road	
Florida	street address (P.O. Box NOT ACCEPTABLE)	
Plantation	<b>FL</b> 33324	
	City/State/Zip	

OI NOV 26 PM 12: 25
SECHETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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..

C T Corporation System
PETER F. SOUZA
ASSISTANT SECRETARY
(Signature)

C T Corporation System

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

## State of Delaware Office of the Secretary of State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SUN COMPUTER EDUCATION SERVICES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF NOVEMBER, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

OI NOV 26 PM 12: 25
SECRETARY OF STATE
TALLAHASSEE, FI ORINA



Darriet Smith Windson, Secretary of State

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AUTHENTICATION: 1456380

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DATE: 11-20-01