

M03 000002081

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

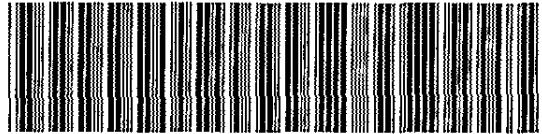
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

003710038787

Office Use Only



700020870737

FILED

03 JUN 25 AM 9:00

STATE
TALLAHASSEE, FLORIDA

RECEIVED

03 JUN 25 PM 4:14

STATE
TALLAHASSEE, FLORIDA

ACCOUNT FILING COVER SHEET

ACCOUNT NUMBER: FCA000000005

REFERENCE:
(Sub Account) 4034323-4

DATE: 6/25/03

REQUESTOR NAME: Lexis Document

ADDRESS: _____

TELEPHONE: (____) (____ - _____) ext (____)

CONTACT NAME: _____

CORPORATION NAME: Cyber Campus & Test Ace LLC

DOCUMENT NUMBER: _____
(if applicable)

AUTHORIZATION: Cynthia J. Woodyard

☒ CERTIFIED COPY (1-9)
☐ CERTIFICATE OF STATUS (1-9)
☒ PLAIN STAMPED COPY

() Call When Ready
() Walk In
() Mail Out

() Call if Problem
() Will Wait

() After 4:30
() Pick Up

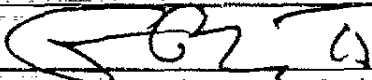
125.00

03 JUN 25 2003
FILED
TALLAHASSEE
FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

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

1. Cyber Campus & Test Ace LLC
(Name of foreign limited liability company)
2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)
3. _____
(FEI number, if applicable)
4. May 28, 2003
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Anticipated July 2003
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 101 N. Clematis Street, Suite 507, West Palm Beach, Florida 33401
(Street address of principal office)
8. If limited liability company is a manager-managed company, check here ☒
9. The name and usual business addresses of the managing members or managers are as follows:
See Attachment
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Online Education


Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Frank A. Benevento, II

Typed or printed name of signer

06/25/03 WED 11:30 FAX 212 319 6108
JUN 18 2003 13:05 FR PILLSBURY WINTHROP

LEXIS DOCUMENT SERVICES
TO 915616590074

003

P.114/09

Attachment

Frank A. Benevento, II
101 N. Clematis Street, Suite 507
West Palm Beach, Florida 33401

Raymond F. Ratcliff, III
880 Apollo Street, Suite 213
El Segundo, California 90245

Denis Khoo
880 Apollo Street, Suite 213
El Segundo, California 90245

FILED
03 JUN 25 AM 9:00
SEAL STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

03 JUN 25 AM 9:00
FILED
TALLAHASSEE, FLORIDA
STATE

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 name of the Limited Liability Company is:

Cyber Campus & Test Ace LLC

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

Corporation Service Company

(Name)

1201 Hays Street

Florida street address (P.O. Box NOT ACCEPTABLE)

Tallahassee FL 32301

(City/State/Zip)

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.

Michael Cordman

(Signature)

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

Delaware

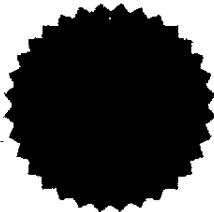
The First State

03 JUN 25 AM 9:00
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
PAGE

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CYBER CAMPUS & TEST ACE 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 TWENTY-FOURTH DAY OF JUNE, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CYBER CAMPUS & TEST ACE LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF MAY, A.D. 2003.

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



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 2492750

3663241 8300

030417587

DATE: 06-24-03