## 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# M08000004377

**Current Principal Place of Business:** 

Entity Name: OPTIONS UNIVERSITY EDUCATION, LLC

FILED Sep 28, 2009 Secretary of State

925 S FEDERAL HWY SUITE 510 BOCA RATION, FL 33432 **Current Mailing Address: New Mailing Address:** 925 S FEDERAL HWY SUITE 510 BOCA RATION, FL 33432 FEI Number: 20-3679785 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FOGLE, BRETT 1698 SW 16TH ST BOCA RATON, FL 33486 US

**New Principal Place of Business:** 

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: BRETT FOGLE

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 FOGLE, BRETT
 Name:

 Address:
 1698 SW 16TH ST
 Address:

 City-St-Zip:
 BOCA RATION, FL 33486
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BRETT FOGLE MM 09/28/2009