

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M08000005397

FILED
Oct 09, 2009
Secretary of State

Entity Name: TEACHER'S CURRICULUM INSTITUTE LLC

Current Principal Place of Business:

3735 BRADVIEW DRIVE, STE 100
SACRAMENTO, CA 95827

New Principal Place of Business:

Current Mailing Address:

3735 BRADVIEW DRIVE, STE 100
SACRAMENTO, CA 95827

New Mailing Address:

FEI Number: 26-3647766

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: MADONNA CUDDIHY

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BOWER, ALBERT
Address: 4009 MIRANDA AVE, STE 100
City-St-Zip: PALO ALTO, CA 94304

Title: MGRM () Delete
Name: LARSON, AMY
Address: 4009 MIRANDA AVE, STE 100
City-St-Zip: PALO ALTO, CA 94304

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: AMY LARSON

COO

10/09/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date