M/200000//32

•
(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:
A. LUNT
FEB 29 2011
EXAMINER

Office Use Only



100222969081

02/27/12--01030--022 **125.00

2012FEB 27 PM 2 62 SECKETARY OF STATE TALLAHASSEE, FLORE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Blueprint Test Preparatio (Name of Limit	n LLC ted Liability Company)
	bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited
Please return all correspondence concerning this ma	atter to the following:
Matthew Riley	7,2
(Nar	me of Person)
Blueprint Test Preparation	on LLC
(Fin	on LLC M/Company) ARETARY OF STA
11832 W. Pico Blvd.	
	(Address)
Los Angeles, CA 90064	
	te and Zip Code)
For further information concerning this matter, plea	ise call:
Matthew Riley	_at (310) 477-8383
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\sum{1}\$125.00 Filing Fee \$\sum{1}\$130.00 Filing Fee & Certificate of \$\sum{1}\$	\$155.00 Filing Fee & \$\infty\$\$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy

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

UMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S		COSIER A FUREION
Blueprint Test Preparation LLC		
(Name of Foreign Limited Liability Company; must include	e "Limited Liability Company," "L.L.C.," o	or "LLC.")
Blueprint Test Prep. LLC	A THE STATE OF THE	
If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C.," "LLC.")		
2. California 3.	65-1239671	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable	,
	Perpetual	
(Date of Organization)	(Duration: Year limited liability companexist or "perpetual")	2012
(Date first transacted business in Flori (See sections 608.501 & 608.502 F.S. to	ida, if prior to registration.) o determine penalty liability)	FEB 27
11832 W. Pico Bívd.	;'1	C 777
Los Angeles, CA 90064	F. COR	
(Street Address of	Principal Office)	62
3. If limited liability company is a manager-managed c	ompany, check here	
2. The name and usual business addresses of the manag	ging members or managers are as fol	lows:
Managing Member, Matthew Riley, 11832	2 W. Pico Blvd., Los Angeles,	CA 90064
Managing Member, Jodi Triplett, 11832	W. Pico Blvd., Los Angeles	, CA 90064
Managing Member, Trent Teti, 11832 V	V. Pico Blvd., Los Angeles,	CA 90064
0. Attached is an original certificate of existence, no more than 90 dance jurisdiction under the law of which it is organized. (A photocopy is anslation of the certificate under oath of the translator must be submit	is not acceptable. If the certificate is in a foreign tted.)	gn language, a
1. Nature of business or purposes to be conducted or p	promoted in Florida: Preparato	ry classes
and tutoring for the Law School Adr	mission Test (LSAT).	•
(M)		
Signature of a member or an auth (In accordance with section 608.408(3), F.S. an affirmation under the penalties of perjury Matthew Riley		

Typed or printed name of signee

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.

TC '1	est Preparation	-		
It name unavail	able, the alternate name t	to be used in the state of Florida is:		
Blueprint T	est Prep. LLC			
2. The name an	d the Florida street addre	ess of the registered agent and office are:	2012 FEB 27 SECRETARY TALLAHASSI	mess _e n,
	Northwest Registe	ered Agent LLC	EB 27	7
		(Name)	RY SEE	
	3111 W. Dr. ML	K Blvd., STE 100-B180	SF SIA	
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	28	
	Tampa	FL 33607	1,5.	
		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, Florida Statutes.

______Dan Keen-Manager _____

\$ 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 California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: BLUEPRINT TEST PREPARATION LLC

FILE NUMBER:

200501010178

FORMATION DATE:

01/10/2005

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 15, 2012.

DEBRA BOWENSecretary of State