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19542080845 From Ranae McGraw

Division of Corporations

lote: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023 Phone: (512)418-6949 Fax Number: (954)208-0845

\*\*Enter the email address for this business entity to be used for future er the email address for this positions end..., to it annual report mailings. Enter only one email address place.\*\*

## LLC REGISTERED AGENT CHANGE TEACHING STRATEGIES, LLC

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## COVER LETTER

	istration Section ision of Corporations					
SUBJECT:	TEACHING STRATEGIES, LLC					
	Nai	me of Limite	d Liability Compar	ny		
Dear Sir or	Madam:					
The enclose	d Registered Agent/Registered Of	tice Change	and fee(s) are subn	iitted for fil	ing.	
Please return	n all correspondence concerning the	his matter to	the following:			
	Leslie Callins					
	Name of Person					
	Firm/Company					
4500 Eas	I-West Highway #300					
	Address					
Bethesda	, MD 20814					
	City/State and Zip Code				ואננן,	2017 JUN
E-mail	address: (to be used for future an	nual report n	otification)		AHA.	MID!
For further i	information concerning this matter	r, please call	:		SSEE,	2
Raye T	ravers- Oni	at ( 301	) 634-0818			
A	Name of Person		Area Code &	Daytime T		
STE	REET/COURIER ADDRESS:		MAILING ADDI	RESS:		ግ <del>፲</del>
Keg	istration Section		Registration Secti	on		
	ision of Corporations		Division of Corpo	rations		
	ton Building		P.O. Box 6327			
	1 Executive Center Circle lahassee, Florida 32301		Tallahassee, Flori	da 32314		
Enc	losed is a check for the followin	g amount:				
	25 Filling Fee		I \$55 Filing Fee &	Certified C	ору	
INHS18 (2/1-	4)					

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 505.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Principal effice address of limited liability company: (Note: MUST BE STREET ADDRESS)  4500 Hast West Highway #300  BETHESDA, MD 20814  Date of filing/registration in Florida  Registered Agent and Registered Office shown on the records of the	- - 4.	4500 East- BETHESD M120000018	(Note: MAY West Highwa A. MD 20814	<i>BE POST</i> y #300	Lability compan	
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NRAI SERVICES, INC	ie Florid	a Dept. of State	TALL	2017		
Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>81</u>	AH.	الے	77	
1200 SOUTH PINE ISEAND ROAD			ASS	ZZ		
PLANTATION FL	33324	<del></del>			i III	
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nier name of NEW Registered Agent and/or NEW Registered (	51016 <b>6</b> 30	mrew.	)A	<u>, , , , , , , , , , , , , , , , , , , </u>		
CT Corporation System						
NEW Registered Office Address.		<del></del>				
1200 South Pine Island Road						
Plantation FL	3332-4					
nited liability company is not organized under the law age or changes are made, the Florida street address of all be identical. Or, in the case of a Florida limited hat a authorized by an affirmative vote of the members of less of organization or the operating agreement of the less of organization or the operating agreement of the less of organization or the operating agreement of the less of organization or the operating agreement of the less of organization or the operating agreement of the less of organization or the operating agreement of the less of organization or the operating agreement of the less of organization or the less of organization organization or the less of organization o	s of the the reg hility of the lin	e State of Floistered office ompany, it is nited liability comfie J. Collins	eand the bus bereby conf company of pany.	iness off frined the as othe	ice of the regi ial the change rwise provide	istere :(s)
y accept the appointment as registered agent and agreems of all statutes relative to the proper and complete to gations of my position as registered agent as provided by reflect a change in the registered office address. In in writing of this change, in the registered of the propertion system ( ) James M. Harporation	ee to ac eerforn for in ereny (		acity. I furth huties, and I F.S. Or, if the limited Ii	er agree am fami this docu ability a	to comply wi liar with and ament is being ompany has b	th thi accep g filo iden
	PLANTATION FL  The name of NEW Registered Agent and/or NEW Registered at CT Corporation System  NEW Registered Office Address.  1200 South Pine Island Road  Plantation FL  mited liability company is not organized under the law ge or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida Innied lia c authorized by an affirmative vote of the members of less of organization or the operating agreement of the law in old opening of an authorized proposition as registered agent and agree in so of all statutes relative to the proper and complete by reflect a change in the registered office address. The in writing of this change.	PLANTATION FL 33324  The name of NEW Registered Agent and/or NEW Registered Office as CT Corporation System  NEW Registered Office Address.  1200 South Pine Island Road  Plantation FL 33324  Plantat	PLANTATION  Their name of NEW Registered Agent and/or NEW Registered Office address:  CT Corporation System  NEW Registered Office Address.  1200 South Pine Island Road  Plantation  FL  33324  Plantation  FL  33324  Plantation  FL  33324  Plantation  FL  33324  Plantation  FL  1200 South Pine Island Road  Plantation  FL  13324  Plantation  FL  133324  Plant	PLANTATION  FL 33324  CT Corporation System  NEW Registered Office Address.  1200 South Pine Island Road  Plantation  FL 33324  Plantation  Functed business of the registered office and the business of the registered office and the business of organization or the operating agreement of the limited liability company of the office of the operating agreement of the limited liability company.  Lessie J. Collins  Functed or type of a decept the appointment as registered agent and agree to act in this capacity. I further that the standard of the proper and complete performance of my duties, and I pations of my position us registered agent as provided for in Chapter 605, F.S. Or, if the proper in the registered office address, I hereby confirm that the limited Its in writing of this change.  James M. Halpin	CT Corporation System  NEW Registered Office Address.  1200 South Pine Island Road  Plantation  FL 33324  Inted liability company is not organized under the laws of the State of Florida, it is hereby conge or changes are made, the Florida street address of the registered office and the business of ill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed it authorized by an affirmative vote of the members of the limited liability company or as otherwise of organization or the operating agreement of the limited liability company.  Lessie J. Collins  Trusted or open name of accept the appointment as registered agent and agree to act in this capacity. I further agree may of all standers relative to the proper and complete performance of my duties, and I am family actions of my position as registered agent as provided for in Chapter 005, F.S. Or, if this doc y reflect a change in the registered office address. Thereby confirm that the limited liability as position System (2,4,4,6,7).  James M. Halpin	CT Corporation System  NEW Registered Office Address.  1200 South Pine Island Road  Plantation  FL 33324  Inited Hability company is not organized under the laws of the State of Florida, it is hereby confirmed that at ge or changes are made, the Florida street address of the registered office and the business office of the registered office and the business office of the registered office and the business office of the registered by an affirmative vote of the members of the limited liability company or as otherwise provide less of organization or the operating agreement of the limited liability company or as otherwise provide less of organization or the operating agreement of the limited liability company.  Lessie J. Collins  The appointment as registered agent and agree to act in this capacity. I further agree to comply with a straight of the proper and complete performance of my duties, and I am familiar with and straight of this change in the registered office address, I hereby confirm that the limited liability company has being wretten of this change.  James M. Halpin

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