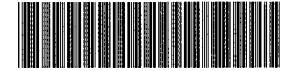
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SECRETARY OF STATE
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K.SALY EXAMINES FEB 1 3 2014

COVER LETTER

CUDING	Flagship Education	on LLC		
SUBJECT:	·	Name of Limited Liability Company		
The enclose Existence, a	d "Application by Foreig and check are submitted to	n Limited Liability Company for Authorization to Transact Business in Florida," Certificate of register the above referenced foreign limited liability company to transact business in Florida		
Please return	n all correspondence con-	cerning this matter to the following:		
	William Segal			
		Name of Person		
	Flagship Educa	ation LLC		
	Firm/Company			
	5425 Wisconsi	in Ave, Suite 600		
	Address			
	Chevy Chase,	MD 20815		
		City/State and Zip Code		
	wsegal@flagsh	liptutors.com		
		E-mail address: (to be used for future annual report notification)		
For further in	nformation concerning th	nis matter, please call:		
W	illiam Segal	202 656-3524		
	Name of Co	ontact Person Area Code Daytime Telephone Number		
Div Reg P.O	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 lahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	s a check for the follo	owing amount: \$130.00 Filing Fee & \$\Bigsup \$155.00 Filing Fee & \$\Bigsup \$160.00 Filing Fee, Certificate Certificate of Status & Certified Copy		

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

IN COMPLIANCE WITH SECTION 605 0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Flagship Education LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "Ll.C.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") 27-2861009 Maryland 2. (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5425 Wisconsin Ave, Suite 600 Chevy Chase, MD 20815 (Street Address of Principal Office) 5425 Wisconsin Ave, Suite 600 Chevy Chase, MD 20815 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: William Segal, Member Brendan Snow, Member 8. 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) Signature of an authorized person (In accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) William Segal > Member, Flasship Education LLC
Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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 C Flagship Education LLC	Company is:	APE T
If unavailable, the alternate to be used	in the state of Florida is:	TILED
2. The name and the Florida street add	ress of the registered agent and office are:	3: 52
Kimberley Snow		r
(Name)		
4070 Scarlet Iris Pla	ace	
Florida Street Address (P.O. Box NOT ACCEPTABLE)		
Winter Park	32792 FL	
	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 605, Florida Statutes.

\$ 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 MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT FLAGSHIP EDUCATION LLC, REGISTERED JUNE 23, 2010, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS FEBRUARY 03, 2014.

Paul B. Anderson

Charter Administrator



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1344 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097

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