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AUG 2 8 2014 -

S. YOUNG

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P 003

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

IN COMPLIANCE WITH SECTION 605,0002 FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Skillup Learning LLC Name of Foreign Limited Liability Company: must include "Limited Liability Company." T.L. C., or "LLC." (If name unavailable, enter attenuate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C." "LLC ") (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 7/1/2014 (Date first wansacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905; F.S. to determine penalty liability) 8801 Latree Ave, Apt 302, Orlando, Florida 32819 (Sueet Address of Principal Office) 8801 Latrec Ave. Apt 302, Orlando, Florida 32819 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has have authority to manage is are: Member: Robert Firebaugh, 8801 Latree Ave, Apt 302, Orlando, Florida 32819 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 anashdou of the carificate tasks onto of the translator anisable 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 beloin 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 \$.\$17.155, F.S.; Robert Firebough
Typed or printed name of signer

Jax awart # 41400202021443

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	e of the Limited Liability (Сошра	ny is:		
Skillup Learn	ing LLC				
If unavailab	le, the alternate to be used	in the	state of Florida is:		
2. The name	e and the Florida street ad	dress o	f the registered agent and office are	2:	
	Business Filings Incorpor	rated			
	(Name)			SEC	*-
	515 E. Park Avenue			XIIIX.	<u> </u>
	Florida Street Address (P.O. Box NOT ACCEPTABLE)			27	
	Tallahassee		32301 FL		R
			City-State/Zip		ئ ين
liability com registered ag statutes rela	pany at the place designate gent and agree to act in thi ting to the proper and com	ed in th is capac plete p	o accept service of process for the actificate. I hereby accept the apity. I further agree to comply with enformance of my duties, and I am foreed agent as provided for in Chapt	pointment (the provisio autiliar with	rs ms of all i and
	Maill				
	Mark Williams, A.V.P., Bus	(Signat siness Fi	•		
		00.00 25.00	Filing Fee for Application Designation of Registered Agent		
		30.00 5.00	Certified Copy (optional) Certificate of Status (optional)		

Jac aud # 4140063021843

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: SKILLUP LEARNING LLC

FILE NUMBER: FORMATION DATE: 201402410040

TYPE:

01/21/2014

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 August 22, 2014.

> **DEBRA BOWEN** Secretary of State

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