M15000008540

(Requestor's Name)
(Address)
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(city, ciator_ip), name ny
PICK-UP WAIT MAIL
(Business Entity Name)
W15-64264
(Document Number)
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COVER LETTER

TO:		ration Section n of Corporation	ns				, · · · · · · · · · · · · · · · · · · ·	
SUBJI		Children's Creative Learning Centers LLC						
Name of Limited Liability Company								
			reign Limited Liability Comp d to register the above refere					
Please	return all	correspondence o	concerning this matter to the	following:				
		Elizabeth Grull	ke					
	Name of Person							
	Knowledge Universe Education LLC							
Firm/Company								
	650 NE Holladay Street, Suite 1400							
Address								
	Portland, Oregon 97232							
City/State and Zip Code								
egrulke@klcorp.com								
E-mail address: (to be used for future annual report notification)								
For fur	ther infor	mation concerning	g this matter, please call:					
	Elizabe	eth Grulke		503 at (872-16	61		
	<u>.</u>	Name o	f Contact Person	Area Code	Day	time Telephone Number		
	Division Registra P.O. Bo	NG ADDRESS: n of Corporations ation Section ox 6327 ssee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301		
Enclose		eck for the follow .00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Cer of Status & Certified Copy		



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 25, 2015

ELIZABETH GRULKE KNOWLEDGE UNIVERSE EDUCATION LLC 650 NE HOLLADAY STREET, SUITE 1400 PORTLAND, OR 97232

SUBJECT: CHILDREN'S CREATIVE LEARNING CENTERS LLC

Ref. Number: W15000064264

We have received your document for CHILDREN'S CREATIVE LEARNING CENTERS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 515A00020374

Nanette Causseaux Regulatory Specialist II Supervisor

www.sunbiz.org

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:

Children's Creative Lea	_			
· (Name of Fore	ign Limited Liability Com	pany; must include "Limited	Liability Company," "L.L.C.,"	or "LLC.")
(If name unavailable, enter al Liability Company," "L.L.C."		he purpose of transacting bus	siness in Florida. The alternate r	name must include "Limited
2. California		₃ 77-03047	28	
(Jurisdiction under the law company is organized)	of which foreign limited li	ability	(FEI number, it applicat	ole)
4	(Date first transac	ted business in Florida, if pric	or to registration.)	
	(See sections 605.09	04 & 605.0905, F.S. to deter	mine penalty liability)	κ .
5. 650 NE Holladay Stree	et, Suite 1400			
Portland, Oregon 9723				= 5 1
		ddress of Principal Office)		TEG 8
6. 650 NE Holladay Street	t, Suite 1400			
Portland, Oregon 9723	32			S. 11
		(Mailing Address)		
7. Name and street addres	s of Florida registered a	gent: (P.O. Box NOT acc	ceptable)	218 31. F.
Name:	C T Corporation Syste	RIDE		
Office Address:	1200 South Pine Islan	nd Road		,
	Plantation		, Florida 33324	
		(City)	(Zip code)	
designated in this applicat	gistered agent and to action, I hereby accept the ons of all statutes relation position as registered	e appointment as registere we to the proper and comp	Nete performance of my dut Ma Assista	ability company at the place this capacity. I further agree ies, and I am familiar with an ax Bode nt-Secretary
8. The name, title or capa	city and address of the p	person(s) who has/have aut	thority to manage is/are:	
John T. Wyatt, Sole Mana	ger, 650 NE Holladay S	Street, Suite 1400, Portland	l, Oregon 97232	
	of which it is organized.	(If the certificate is in a fo	enticated by the official having oreign language, a translation erson	of the certificate under oath
		Signature of an authorized pe	erson	
	in accordance with sect	ion 605.0203 (1) (b), Flori	da Statutes. I am aware that a felony as provided for in s.8	any false information
	Kathryn Gallagher, As	sistant Corporate Secretary	v	

Typed or printed name of signee

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: CHILDREN'S CREATIVE LEARNING CENTERS LLC

FILE NUMBER: FORMATION DATE:

201522410125 08/12/2015

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, 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 12, 2015.

ALEX PADILLA Secretary of State