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 $T \circ :$ 

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023

Phone : (850)205-8842 Fax Number : (850)878-5368

Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## Foreign Limited Liability Company TEACHER MATCH, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
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TO:

## **COVER LETTER**

):	Registration Section Division of Corporation	dus				
вје	CT: Teacher Match, L	LC				
	· · · · · · · · · · · · · · · · · · ·	Name of	Limited Liability (	Сотрапу		
e end isten	closed "Application by Fo	oreign Limited Liability Compedition to register the above reference to the contract of the co	pany for Authoriza enced foreign limit	tion to Tr ed liabilit	ansact Business in Florida," y company to transact busin	Certificate of
arc i	return all correspondence	concerning this matter to the	following:			
	Joseph Watter	nbarger				
	<u> </u>	N	ame of Person		· · · · · · · · · · · · · · · · · · ·	
	Teacher Mate	<del></del>				
		F	irm/Company			
	4611.N. Rave	nswood, Unit 101				
			Address			
	Chicago, IL 6	0640				
		City/S	itate and Zip Code			
	jwattenbarger@	leachermatch.org				
		E-mail address: (to be use	d for future annual	report no	tification)	
furt	her information concerni	ng this matter, please call:				
	Monique Burgos		888 at (	312-72	231	
	Name	of Contact Person	Area Code	Day	time Telephone Number	
	MAILING ADDRESS Division of Corporation			STREET	F ADDRESS: of Corporations	
	Registration Section	<b>.</b>			ion Section	
	P.O. Box 6327 Tallahassee, FL 32314				Building ecutive Center Circle see, FL 32301	
ose	d is a check for the follow	wing amount!				
	☑ \$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	S155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Co of Status & Certified Cop	

## 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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Teacher Match, LLC					
(Name of Fore	ign Limited Liability Company; must include "Lin	nited Liability Company," "L.L.C.," or	"LLC.")		
.iability Company," "L.L.C,	ermate name adopted for the purpose of transactin	g business in Florida. The alternate nar	ne must inc	lude "L	 imitod
Deloware	J.	764286			
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable	)		_
·	(Date first transacted business in Florida,	f prior to registration.)	_		
4611 N. Ravenswood,	(See sections 605,0904 & 605,0905, F.S. to Unit 101, Chicago, IL 60640	determine penalty liability)			
•			-		
	(Street Address of Principal Offic	<del>(20</del> )	-		
4611 N. Ravenswood, I	Unit 101, Chicago, IL 60640		_		
	(Mailing Address)		<u>:</u>		
. Name and street addres	s of Florida registered agent: (P.O. Box NO	T acceptable)			
Name:	NRAI Services, Inc.		**	APR	
Office Address:	1200 South Pine Island Road		•	8-	
	Plantation	, Florida 33324		AMI	
Registered agent's accep	(City)	(Zip code)		==	
Taving been named as re lesignated in this applica o complywith the provision	gistered agent and to accept service of proce tion, I hereby accept the appointment as reg ons of all statutes relative to the proper and o my position as registered agent.	istered agent and agree to act in th	ils capacit	y. I fui	rther agre
	By: Ni chelle Holele Michel (Registered agent's s	le Holden, Asst. Secretary			
	(Registored agent's s	ignature)	_		
8. The name, title or caps	icity and address of the person(s) who has/hav	e authority to manage is/are:			
Glenn Renzulli - Chief Fi	nancial Officer - 4611 N. Ravenswood, Unit	101, Chicago, IL 60640			
Joseph Wattenbarger - Ac	counting Manager - 4611 N. Ravenswood, U	nit 101, Chicago, IL 60640		-	
Monique Burgos - HR - 4	611 N. Ravenswood, Unit 101, Chicago, IL 6	0540		_	
	of existence, no more than 90 days old, duly of which it is organized. (If the certificate is in ubmitted)	n a forcion language a translation o			
	Signature of an authori	zed person	_		
	in accordance with section 605.0203 (1) (b), o the Department of State constitutes a third de				IQ.
	Glenn Renzulli		_		
	Typed or printed name of	fsignee	_		

## Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TEACHER MATCH, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE SIXTEENTH DAY OF FEBRUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

at corp.delaware.gov/auth

Authentication: 201839958

Date: 02-16-16

5047514 8300

SR# 20160860415

You may verify this certificate online at corp.delaware.gov/authver.shtml