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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates o	of Status
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: 120000000088 July 08, 2022 James Brodbeck Name:_ 1655928 Reference #:___ Entity Name: INSIGHT EDUCATION GROUP, LLC Articles of Incorporation/Authorization to Transact Business Amendment Change of Agent Reinstatement Conversion Merger □ Dissolution/Withdrawal Fictitous Name Other

-1.212.947.7200

Signature:

Authorized Amount:

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA: INSIGHT EDUCATION GROUP, LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.I. C." or "H.I.C.") California (Jurisdiction under the law of which toreign limited liability company is organized) 5/10/2022 (Date first transacted business in Florida, if prior to registration) (See sections 605 0904 & 605 0905, F.S. to determine penalty hability) 15760 VENTURA BLVD STE 700 15760 VENTURA BLVD STE 700 (Street Address of Principal Office) (Mailing Address) **ENCINO, CA 91436 ENCINO, CA 91436** 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) COGENCY GLOBAL INC. Name: 115 North Calhoun St. Suite 4 Office Address: Tallahassee . Florida (City) Registered agent's acceptance: 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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

J	aime 🛚	Forres	DN. cn-Jaime Torres, p. ou. email-proresecopencyglobat.com, c=US Date: 2022,05.10.11.48.42.05'00'	
(Registered agent's signature)				

Name: Adam Hall Manager Name:	lress:
Name: Name:	
Address: 2805 Dodd Rd Member Address:	
Eagan, MN 55121	
Person	
Other Other Other	
Name: Jason Stricker Manager Name:	
Address: 15760 VENTURA BLV	72
STE 700 Authorized	
ENCINO, CA 91436 Person	
Other Other Other	
	,
Name: Michael Moody Manager Name:	<u>5</u>
Address: 15760 VENTURA BLV	
STE 700 Authorized	
ENCINO, CA 91436 Person	
Other Other Other	
ENCINO, CA 91436 Person	iy or

Typed or printed name of signee



I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name:

INSIGHT EDUCATION GROUP, LLC

Entity No.:

202133810004

Registration Date:

11/27/2002

Entity Type: Formed In: Limited Liability Company - CA CALIFORNIA

Status:

Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, 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 May 17, 2022.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 012326823

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.