

APPROVED
AND
FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

00 OCT 24 PM 2:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M99000001803

1. Corporation Name

CA Coral Springs LLC

REINSTATEMENT 2000

2. Principal Office Address

3250 Mary St.

3. Mailing Office Address

3250 Mary St.

Suite, Apt. #, etc.

Suite 202

Suite, Apt. #, etc.

Suite 202

City & State

Coconut Grove, FL

City & State

Coconut Grove, FL

4. Date Incorporated or Qualified
To Do Business in Florida

November 15, 1999

5. FEI Number

65-0962483

Applied For

Not Applicable

Zip

33133

Country

USA

Zip

33133

Country

USA

6. CERTIFICATE OF STATUS DESIRED ☒See instructions at the Department
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Chancellor Academies, Inc.

Street Address (P.O. Box Number is Not Acceptable)

3250 Mary St.

Suite, Apt. #, Etc.

Suite 202

City

Coconut Grove

State
FL

Zip Code

33133

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Charles Andolsek, CFO

Date 10/20/00

REGISTERED AGENT FOR Academies, Inc.

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
	N/A - see attachment		

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(b), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Charles Andolsek, CFO

305-648-5950

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Chancellor Academies, Inc.

Date

Daytime Phone #

CR2001 (9/99)

-2

(2)

**ATTACHMENT TO CORPORATION REINSTATEMENT FOR CA CORAL
SPRINGS LLC**

Page 1 of 1

**Part 9. CA Coral Springs LLC is managed by its sole member, Chancellor
Academies, Inc., 3250 Mary St., Suite 202, Coconut Grove, FL 33133.**



ACCOUNT NO. : 072100000032

REFERENCE : 873618 4302480

AUTHORIZATION :

COST LIMIT : \$ 155.00

Patricia Pizit

ORDER DATE : October 24, 2000

ORDER TIME : 1:37 PM

ORDER NO. : 873618-005

CUSTOMER NO: 4302480

CUSTOMER: Marsha Fincher, Paralegal
Bingham Dana LLP
399 Park Avenue
21st Floor
New York, NY 10022-4689

DOMESTIC FILINGS

NAME: CA CORAL SPRINGS LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

EXAMINER'S INITIALS _____

RECEIVED
00 OCT 24 PM 2:27
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA