



M99000001803

ACCOUNT NO. : 072100000032

REFERENCE : 886517 7229935

AUTHORIZATION :

COST LIMIT : \$ 25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 NOV -3 PM 3:56

FILED

ORDER DATE : November 3, 2000

ORDER TIME : 1:26 PM

ORDER NO. : 886517-015

CUSTOMER NO: 7229935

CUSTOMER: Mr. Charles Andolsek
Chancellor Academies
Suite 202
3250 Mary Street
Miami, FL 33133

600003452226--2

CHANGE OF AGENT

NAME: CA CORAL SPRINGS LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Janna Wilson

TO AGENT
SUFFICIENCY OF FILING

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RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

M99-1803

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: CA Coral Springs LLC
2. The mailing address of the limited liability company is : 3250 Mary Street, Suite 202
Coconut Grove, Florida 33133

3. Date of filing/registration in Florida 6/9/99
4. Document number F99000002980 1199-1803

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Chancellor Academies, Inc.
Name
3250 Mary Street, Suite 202
Address
Coconut Grove, FL 33133
City, State and Zip

6. The name and address of the new registered agent and/or office:

Corporate Service Company
Name
1201 Hays Street
Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32301-2525
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
(Signature of a member or authorized representative of a member)

CHARLES M ANDOLSEK
(Printed or typed name of signer)

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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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