Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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Account Name

: C T CORPORATION SYSTEM

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Account Number : FCA000000023 : (850)222-1092

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.

Email Address:

REGISTERED AGENT CHANGE NEWGLOBAL LEARNING ACADEMY, INC.

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Electronic Filing Menu

Corporate Filing Menu

R. WHITE

COVER LETTER

TO:	Amendment Section Division of Corporations				
0110 11	NEWGLOBAL LEARNING ACADEMY, INC.				
SUBJECT: Name of Corporation					
מסכנ	UMENT NUMBER:				
The en	enclosed Statement of Change of Registered Office/Ag	ent and fee are submitted for filing.			
	e return all correspondence concerning this matter to the				
	Mike Hadjinghai				
	Name of Contact	Person			
NEWGlobal Learning Academy, Inc.					
Firm/Company					
2611 Temple Heights Drive, Suite A					
	Address				
	Oceanside, CA 92056				
	City/State and Zi	p Code			
	Mike.Hadjiaghai@siatech.org				
	E-mail address: (to be used for future	e annual report notification)			
For fu	further information concerning this matter, please call:				
Mike	e Hadjiaghai	760 631-3400			
	Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.					
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building			
	Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of FL to change its registered office or registered agent, or both, in the State of Florida.	
	he corporation: NEWGLOBAL LEARNING ACADEMY, INC.	
2. The principal	office address: 5301 N.E. 40TH TERRACE, GAINESVILLE, FL 32609	
3. The mailing a	ddress (if different); 660 BAST COUNTRY CLUB DRIVE WILLISTON, FL 32696	
4. Date of incorp	poration/qualification: 02/26/2010 Document number: N10000002014	
5. The name and	street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	
·	DIETZIN, LBONARD JIII	
	215 SOUTH MONROB STREET, SUITE 130	•
'	TALLAHASSER, FL 32301-7721	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
	CT Corporation System	ED
	c/o C T Corporation System, 1200 South Pine Island Road	
	P.O. Box NOT ecceptable Plantation, Florida 33324	
	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change was authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so te board, or the corporation has been notified in writing of the change.	
	Alfreson Gorry Baumann, Board Treasurer	
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agent and agree to act in this capacity. The appointment as registered agent and agree to act in this capacity. The comply with the provisions of all statutes relative to the proper and complete and complete and for familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
By: VCTC	ornoration System 5/28/2013	
	nsture of Registered Agent	
Sierra Bu Vica Pres	half of an entity: mis sident & Assistant Secretary ped or Primod Name	

* * * RILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
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