2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000072617

Entity Name: TULSA WELDING SCHOOL/JACKSONVILLE CAMPUS, INC.

FILED Oct 14, 2008 Secretary of State

3500 SOUTHSIDE BLVD. 3500 SOUTHSIDE BLVD ATTN: WAYNE GORDIN ATTN: STACEY BISCOTTI JACKSONVILLE, FL 32216 JACKSONVILLE, FL 32216

New Mailing Address: **Current Mailing Address:**

3500 SOUTHSIDE BLVD 3500 SOUTHSIDE BLVD ATTN: WAYNE GORDIN ATTN: STACEY BISCOTTI JACKSONVILLE, FL 32216 JACKSONVILLE, FL 32216

FEI Number: 59-3708228 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HARTER, R. MICHAEL CORPORATION SERVICE COMPANY 3500 SOÚTHSIDE BLVD 1201 HAYS STREET US TALLAHASSEE, FL 32301 JACKSONVILLE, FL 32216 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LYNN CANNELONGO 10/14/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title: PRFS HARTER, R. MICHAEL BROWN, LAWRENCE CEO Name: Name: 313 WILDBERRY ROAD 59 REDNER ROAD Address: Address: City-St-Zip: PITTSBURGH, PA 15238 City-St-Zip: MORRISTOWN, NJ 07960

PAS () Delete Title: (X) Change () Addition Title: Name: HESS, ROGER Name: MCQUEENEY, MICHAEL CFO 11812 NORTH 137TH WAY 70 W. CHIPPEWA ST., STE. 500 Address: Address: SCOTTSDALE, AZ 85259 BUFFALO, NY 14202 City-St-Zip:

Title: Title: () Change (X) Addition () Delete CIVELEK, BARIS Name: Name:

70 W. CHIPPEWA ST., STE 500 Address Address: City-St-Zip: City-St-Zip: BUFFALO, NY 14202

Title: () Delete Title: DIR () Change (X) Addition GIOELLA, ROBERT Name: Name: Address: Address: 70 W. CHIPPEWA ST., STE. 500 City-St-Zip: City-St-Zip: BUFFALO, NY 14202

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAWRENCE BROWN **PRES** 10/14/2008