## 78400073932

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: Mentor Communication Learning and Su	upport, Inc.			
(Name of Corporatio	n)			
DOCUMENT NUMBER: P04000073932				
The enclosed Statement of Change of Registered Office/Agent a	and fee are submitted for filing.			
Please return all correspondence concerning this matter to the fo	llowing:			
Patricia E. McQueeney				
(Name of Contact Person)				
Learn.com, Inc.				
(Firm/Company)				
14001 NW 4th Street	<del> </del>			
(Address)				
Sunrise, FL 33325				
(City/State and Zip Co	ode)			
For further information concerning this matter, please call:				
Patricia E. McQueeney at (9)	54 ) 233-4000 x5106 rea Code & Daytime Telephone Number)			
(Name of Contact Person) (A	rea Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of S	State.			
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			
	Tallahassee, FL 32301			

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

statement of ch	provisions of sections 007.0502, 617.0502 ange is submitted for a corporation organi er to change its registered office or registe	ized under the laws of the State of _	Florida	
	the corporation: Mentor Communication L	_		
	office address: 14000 NW 4th Street, Sur			
3. The mailing	address (if different): Same			
4. Date of incor	poration/qualification: 05/06/2004	Document number: P040000	73932	
	d street address of the current registered ag	gent and registered office on file wit	h the	
	American Information Services, In	nc.	200 TAI	
	American Information Services, Inc.  350 East Las Olas Blvd Suite 1600			
	Fort Lauderdale, FL 33301 US		-7 I	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Patricia E. McQueeney, Learn.com, Inc.				
	14001 NW 4th Street		-	
	(P.O. Box NOT acceptable)		<del>_</del>	
	Sunrise, FL 33325 US		_	
The street addr	ess of its registered office and the street at be identical.	address of the business office of it	s registered agent,	
Such change w authorized by t	as authorized by resolution duly adopted he board, or the corporation has been not	by its board of directors or by an tified in writing of the change.	officer so	
(Signat	ure of an officer or diperor)	James B. Riley, President	atle)	
I hereby accept I further agree of my duties) ar document is be corporation hu	t the appointment as registered agent and to comply with the provisions of all statu nd I am familiar with and accept the obli ing filed merely to reflect a change in the s been notified in writing of this change.	d agree to act in this capacity, ites relative to the proper and con gation of my position as registere e registered office address, I hereb	aplete performance d agent. Or, if this by confirm that the	
<del>\</del> \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	m 2	[0.66.61		
(Si	gnature of Registered Agent)	(Datc)		
If signing on bo	chalf of an entity:			
Patricia E. M				
(	Typed or Printed Name)			
	* * * FILING FE	E: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)