

PD50000560931

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

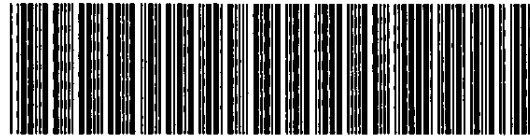
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DIVISION OF CORPORATIONS
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@ 12/18/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Study Abroad Poland, Inc.

Name of Corporation

DOCUMENT NUMBER: P05000056931

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Roberto Neuberger

Name of Contact Person

Active Filings LLC

Firm/Company

3109 Stirling Rd. Suite 202

Address

Fort Lauderdale, FL 33312

City/State and Zip Code

operations@activefilings.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Roberto Neuberger

Name of Contact Person

at (800) 609-2521

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
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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Study Abroad Poland, Inc.
2. The principal office address: 1035 Primera Blvd, Ste 1041, Lake Mary, FL 32746
3. The mailing address (if different): 478 E. Altamonte Dr. Suite 108, PMB 332, Altamonte Springs FL 32701

4. Date of incorporation/qualification: 04/18/2005 Document number: P05000056931

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Holly K Bouma, 601 Sabal Lake Drive, Apt 203

Longwood, FL 32779

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company, 1201 Hays Street,

Tallahassee, FL 32301

P.O. Box NOT acceptable

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

DocuSigned by:

Holly K Bouma

Holly K Bouma, Director

Signature of Agent or Director

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

DocuSigned by:

Lamont W Jones

12/03/2012

Signature of Registered Agent

Date

If signing on behalf of an entity:

Lamont W Jones, Assistant VP

Typed or Printed Name

*** FILING FEE: \$35.00 ***

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