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## $\hat{\P}$ . STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chang	ovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ge is submitted for a corporation organized under the laws of the State of <u>Florida</u> to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the	corporation: Professional Learning Solutions, Inc.
	fice address: 10950 72nd Street N., Suite 103, Largo, Fl 33777
3. The mailing add	lress (if different):
4. Date of incorpor	ration/qualification: 1/22/08 Document number: P0800008032
5. The name and si Florida Departm	treet address of the current registered agent and registered office on file with the nent of State:
	Mark J. Georges, 15459 2nd Street E, Madeira Beach,
_	F1 33708
(if changed):	treet address of the new registered agent (if changed) and /or registered office
	Mark J. Georges, 10950 72nd Street N.,  Suite 103, Largo, Fl 33777  (P.O. Box NOT acceptable)
The street address as changed will be	of its registered office and the street address of the business office of its registered agent, e identical.
Such change was authorized by the	authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
(Signature	Mark J. Georges, President (Printed or typed name and title)
I hereby accept th I further agree to of my duties, and a document is being corporation has b	e appointment as registered agent and agree to act in this capacity. comply with the provisions of all statutes relative to the proper and complete performance I am familiar with and accept the obligation of my position as registered agent. Or, if this filed merely to reflect a change in the registered office address, I hereby confirm that the een notified in writing of this change.
- Just	Hug- 4/1/08
If signing on beha	If of an entity:
(Турс	ed or Printed Name)

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

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