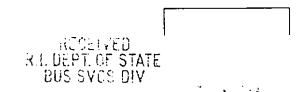
RI SOS Filing Number: 202207652000 Date: 1/4/2022 12:57:00 PM



Department of State - Business Services Division



Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

2022 JAN -4 PM 12: 57

		9 the undersigned corporation sured agent in the State of Rhode		
1. Entity ID Number	2. Exact Name of the Corp	2. Exact Name of the Corporation		
001693490	Apex Learning Inc.	Apex Learning Inc.		
3. The address of the reg	istered office as PRESENTLY s	hown in the records on file with t	he RI Department of State:	
Street Address 222 JEFFER	RSON BOULEVARD, SUITE 200			
City/Town WARWICK		State RHODE ISLAND	Z:p 02888	
4. The name of the regist	ered agent as PRESENTLY sho	own in the records on file with the	RI Department of State:	
CORPORATION SERVICE	ECOMPANY			
5. The address of the NE	W registered office is.			
Street Address (NOT a P.O.	Box) 450 Veterans Memorial Park	cway, Suite 7A		
City/Town East Providence		State RHODE ISLAND	Zip 02914	
6. The name of the NEW	registered agent is:			
C T Corporation System				
7. Date when this Statem	nent of Change of Registered Ag	gent will be effective: CHECK ON	IE BOX ONLY	
➤ Date received (Upo				
Later effective date	(Date must be no more than 30	days from the date of filing)	<u> </u>	
	I declare and affirm that I have statements contained herein are	examined this Statement of Cha e true and correct	nge of Registered Agent by the	
Name of Authorized Office	er of the Corporation		Date	
Frank Jalufka, CFO			01/03/2022	
Signature of Authorized of	Officer of the Corporation			

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 **Website**: www.sos.ri.gov

ALED

JAN 0 4 2022

FORM 640 - Revised 08/2020