2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000003413

Entity Name: C2 EDUCATIONAL SYSTEMS INC.

Current Principal Place of Business:

6465 EAST JOHNS CROSSING

STE 100

JOHNS CREEK, GA 30097

Current Mailing Address:

6465 EAST JOHNS CROSSING

STE 100

JOHNS CREEK, GA 30097 US

FEI Number: 22-3884949 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC. 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

FILED Apr 18, 2019

Secretary of State

5938261646CC

Officer/Director Detail:

1680

Title VC Title PD

Name KENNEDY, DAVID Name KIM, DAVID

Address 1 EMBARCADERO CENTER - STE Address 6465 EAST JOHNS CROSSING - STE

City-State-Zip: SAN FRANCISCO CA 94111 City-State-Zip: JOHNS CREEK GA 30097

Title D Title CEO

Name OREIZY, NAVID Name WALLER, PETER

Address 1 EMBARCADERO CENTER - STE Address 6465 EAST JOHNS CROSSING

1680 STE 100

City-State-Zip: SAN FRANCISCO CA 94111 City-State-Zip: JOHNS CREEK GA 30097

Title CFO Title OFFICER

Name MOORE, MARTIN Name LOBO, ANDREW

Address 6465 EAST JOHNS CROSSING Address 6465 EAST JOHNS CROSSING

STE 100 STE 100

City-State-Zip: JOHNS CREEK GA 30097 City-State-Zip: JOHNS CREEK GA 30097

Title OFFICER

Name KENNA, BRYAN

Address 6465 EAST JOHNS CROSSING

STE 100

City-State-Zip: JOHNS CREEK GA 30097

I hereby 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 all other like empowered.

SIGNATURE: MARTIN MOORE EVP & CFO 04/18/2019