

F-11000000851

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

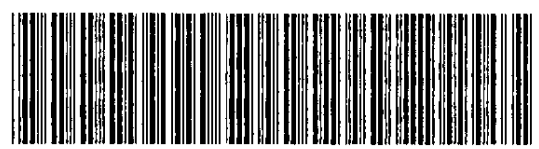
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch FEB 25 2011

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Syntelesys Educational Services
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Carey Chrisman
Name of Person
1-2-3 Academic Tutoring Service
Firm/Company
2550 Corporate Pl C-108
Address
Monterey Park, Ca 91754
City/State and Zip code
academictutoringservice@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frank Guiterrz at (800) 293-3091
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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1. Syntelesys Educational Services Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

1-2-3 Academic Tutoring Service

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Los Angeles California

(State or country under the law of which it is incorporated)

3. _____

(FEI number, if applicable)

4. Nov 10, 2009

(Date of incorporation)

5. Perputal

(Duration: Year corp. will cease to exist or "perpetual")

6. October 2011

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2550 Corporate PI C-108 Monterey Park Ca. 91754

(Principal office address)

2550 Corporate PI C-108 Monterey Park Ca.91754

(Current mailing address)

8. Tutoring of school Children (Math/ELA)

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

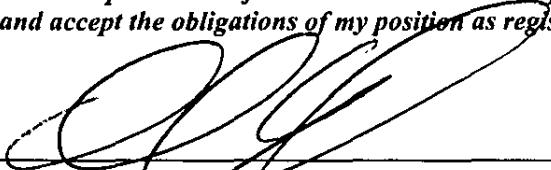
Name: Daniel York

Office Address: 1970 E. Esceola Pkwy #

Kissimmee, Florida 34743
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 obligations of my position as registered agent.



(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Carey Chrisman

Address: 2550 Corporate Pl C-108
Monterey Park Ca. 91754

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: Carey Chrisman

Address: 2550 Corporate Pl C-108
Monterey park Ca 91754

Vice President: Jennifer Chrisman

Address: 2550 Corpotare pl C-108
Monterey Park Ca. 91754

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

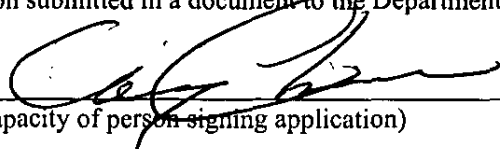
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Carey Chrisman---President

(Typed or printed name and capacity of person signing application)



State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

SYNTELESYS EDUCATIONAL SERVICES, INC

FILE NUMBER: C3259491
FORMATION DATE: 01/10/2011
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

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SECRETARY OF STATE
FALL BRIDGE, CALIFORNIA

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of December 20, 2010.

Debra Bowen

DEBRA BOWEN
Secretary of State