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(Requestor's Name)

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(City/State/Zip/Phone #)

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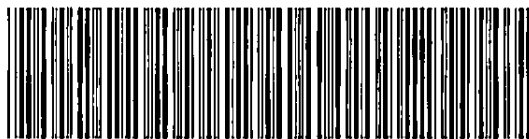
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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B KINSEY  
JUN 28 2019

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PAX EXCEL  
PAX Project for Academic Excellence  
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:

Carla Joseph-Baker  
Name of Person  
Project for Academic Excellence - PAX EXCEL  
Firm/Company  
1725 London Crest Dr # 109  
Address  
Orlando FL 32835  
City/State and Zip code  
cbaker@paxexl.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carla Joseph-Baker at (407) 748-8206  
Name of Person Area Code Daytime Telephone Number

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

MAILING ADDRESS:

Registration 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.

1. PAX, Inc., Project For Academic Excellence  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. OHIO 3. 34-1446762  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 21 / 1984 5. 10 / 06 / 2021  
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 242 Bellflower Ave NW Canton OH 44708  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

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

Name: Carla Joseph-Baker  
Office Address: 1725 London Crest # 109  
Orlando, Florida FL 32818  
(City) (Zip code)

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9. 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.*

Carla Joseph-Baker  
(Registered agent's signature)

10. 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.

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

A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Carla Joseph-Baker

Address: 1725 London Crest #109  
Orlando FL 32818

Director: Crystal Crable-Smith

Address: 242 Bellflower Ave NW  
Canton Ohio 44708

B. OFFICERS

President: Waylene Donawa

Address: 1725 London Crest #109  
Orlando FL 32818

Vice President: Kamarece Fenton

Address: 1032 W. Jefferson St #7  
Orlando FL 32805

Secretary: Darlene Brown

Address: 524 Seneca Dr Lawrenceville GA 30044

Treasurer: Crystal Crable-Smith

Address: 242 Bellflower Ave NW Canton, Ohio 44708

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JUDGE  
TALLAHASSEE, FLORIDA

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

12.   
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. Carla Joseph-Baker - Director  
(Typed or printed name and capacity of person signing application)

UNITED STATES OF AMERICA  
STATE OF OHIO  
OFFICE OF THE SECRETARY OF STATE

*I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show PAX, INC., PROJECT FOR ACADEMIC EXCELLENCE, an Ohio not for profit corporation, Charter No. 636554, having its principal location in Canton, County of Stark, was incorporated on June 21, 1984 and is currently in GOOD STANDING upon the records of this office.*



Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio  
this 28th day of June, A.D. 2019.

*Frank LaRose*

Ohio Secretary of State

Validation Number: 201917902242

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CLERK OF THE  
TALLAHASSEE, FLORIDA