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(Re	questor's Name)	
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PICK-UP	<b></b> WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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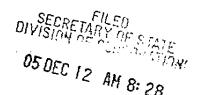
#### **COVER LETTER**

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	Plando Education	nal seein	Es, Inc.
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Englaced are an original	ringland and (1) convert the out	islas of incorporation and	to chack for
Enclosed are all orly	ginal and one (1) copy of the art	icles of incorporation and	i a check for.
<b>570.00</b>	\$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
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FROM:	markel p. A.	1145	
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	132 E . Colon	Address	
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	City	, State & Zip	
	(Um) 22-1	D 344	
	(407) 235 OG Daytime	Telephone number	· · · · · · · · · · · · · · · · · · ·
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NOTE: Please provide the original and one copy of the articles.

#### ARTICLE OF INCORPORATION



#### ORLANDO EDUCATIONAL SERVICE, INC

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I

The name of the corporation shall be:

#### ORLANDO EDUCATIONAL SERVICE. INC

#### ARTICLE II

The principal place of business and mailing of this corporation shall be:

#### ORLANDO EDUCATIONAL SERVICE, INC 132 E. COLONIAL DR SUIT # 215 , ORLANDO FL, 32801

#### ARTICLE III

the number of stock that this corporation is authorized to have outstanding At any one time is:

MAIKEL R. ARIAS (100%) 100 SHARES

TOTAL OF SHARES 100 (\$1.00 value per shares)

#### ARTICLE IV

The name and address of the initial Registered Agent is:

MAIKEL R. ARIAS 228 ALTAMONTE BAY CLUB CIRCLE 107 ALTAMONTE SPRINGS, FL 32701

#### ARTICLE V

The name (s) and street address of the incorporator (s) to these Articles of Incorporation is (are )

MAIKEL R. ARIAS, PRESIDENT, SECRETARY, TREASURER

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this:

12/08/05

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENTS IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA

The name of the corporation is:

#### ORLANDO EDUCATIONAL SERVICE, INC

The name of the registered Agent is:

## MAIKEL R. ARIAS 228 ALTAMONTE BAY CLUB CIRCLE 107 ALTAMONTE SPRINGS, FL 32701

HAS BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT MY POSITION AS REGISTERED AGENT.

Registered Agent

Date

05 DEC 12 AM 8: 28