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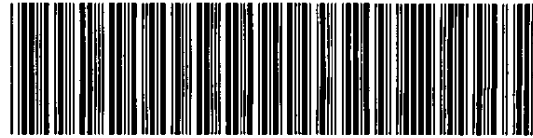
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16 OCT 20 AM 9:48

716 10/25/16

## ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S.; (Not for Profit)

### ARTICLE I NAME

The name of the corporation shall be: Svenska Skolan - Space Coast Inc.

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### ARTICLE II PRINCIPAL OFFICE

Principal street address:

1642 S Banana River Dr

Merritt Island, FL 32952

Mailing address, if different is:

CLERK OF STATE  
TALLAHASSEE FLORIDA

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The objective of Svenska Skolan - Space Coast Inc. are to provide children of members of the organization training in the Swedish language in a safe and stimulating environment; and exposure to Swedish culture, history and customs. It will follow the curriculum for "Kompletterande svensk undervisning i utlandet" issued by the Swedish Ministry of Education.

### ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

The directors are appointed by annual general meeting

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Marcus Kvarnstrom - President Name and Title: JESPER PERNER - SECRETARY

Address: 1205 FAULKINGHAM RD Address: 1642 S BANANA RIVER DR  
MERRITT ISLAND, FL 32952 MERRITT ISLAND FL 32952

Name and Title: Helen Rydgren - treasurer Name and Title: Jeanette Axelsson, member

Address: 102 Aucila Rd Address: 384 Carmine Dr  
Cocoa Beach FL 32931 Cocoa Beach, FL 32931

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

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

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

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

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

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

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Jesper Persen

Address: 1642 S Banana River Dr.  
Merritt Island, FL 32952

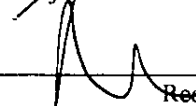
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Marcus Kvarnström

Address: 1205 Faulkingham Rd  
Merritt Island, FL 32952

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Required Signature of Registered Agent

10/18/16  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any 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.*

  
\_\_\_\_\_  
Required Signature of Incorporator

10/18/16  
Date

16 OCT 20 AM 9:48  
DEPT. OF STATE  
TALLAHASSEE FLORIDA