<u> </u>	<u></u>		· · · · · · · ·
		<b>M M A</b>	
+1			2244
TO: Registration S Division of C			
SUBJECT:	Childrens Educ (Name of Corporation -	Ation Foundation must include suffix)	INC
Dear Sir or Madam:			
mans minorida, Ce	ion by Foreign Not for Profit ( rtificate of Existence", and che n to conduct its affairs in Flor	ock are submitted to read	ation to Conduct its ster the above referenced
	oondence concerning this matte	er to the following:	00040775091 -04/25/0101068002 *****87.50 *****87.50
·	Ceoige Jon (Name of F	10	
		erson)	
	Cleo Inc (Firm/Con	30001	
122	1 Brickell Ave	4900	
Mami	(Addres Florider 33) (City/State and	31	NI LPR 25
_	concerning this matter, please	call:	- ED 2 ог эх
(Name of Person)	2 Jou 20 at ( )	<b>305</b> ) <b>377 - 87</b> Area Code & Daytime Te	8 g lephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399		MAILING ADDRESS Registration Section Division of Corporation P. O. Box 6327 Tallahassee, FL 32314	ns N
Enclosed is a check for the	e 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 NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Childrens Education Foundation Juc
1. <u>Childrens Education Foundation Juc.</u> (Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. <u>DelAware</u> (State or country under the law of which it is incorporated) 3 (FEI number, if applicable)
4
6
7. $1221$ Brickell Ave # 900, Miami, FI 3313/ (Principal office address)
(Current mailing address)
8. <u>NON profit working with underprivledged voulb</u> (Purpose(s) of corporation authorized in home state or country to be carried out in/the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: <u>George Jours</u>
Office Address: 1221 Brickell Ave # 900
, Florida, Zip Code)
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the character to the second service of the second second service of the second second second service of the second secon

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.

- 2-. (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 addresses of officers and/or directors:

### A. DIRECTORS

Chairman: George Jours	
Address: 1221 Bruckell Ave # 900, Man, F	33/3/
Vice Chairman: DAWN Scatt	
Address: 3054 Centre St	
MIAM, F1 33131	
Director:	
Address:	· .
Director:	
Address:	
B. OFFICERS	-1
President: BRINDA HUFF	
Address: 1500 OCRAN Drive, # 301, MIAni, F	
Vice President: LISA GASI	
Address: 3710 MICANOPY, MIAMI, Fl 33139	
Secretary: Robot FINE	
Address: 801 Brickell Ave, # 427, MIANI, FI	33/3/
Treasurer: Brillam MArtin	
Address: 827 Brickell Ave, # 411, MIAMI, FL, 33	3
NOTE: If necessary, you may attach an addendum to the application listing addition	al officers and/or directors.
13 (Signature of Chairman, Vice Chairman, or any officer listed in num	ber 12 of the application)
14. <u>Gross Jones / Exclusion Director</u> (Typed or printed name and capacity of person signing appl	set is or the approaction)
(Typed or printed name and capacity of person signing appl	ication)

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# State of Delaware Office of the Secretary of State PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHILDREN'S EDUCATION FOUNDATION INC. " IS DULY INCORPORATED\_UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF MARCH, A.D. 2001.



Smith Windson <u>Var</u> Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1047477

DATE: 03-27-01

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010149195

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FOLDO		2241
TO: Registration Section Division of Corporations	AL LETTER	
SUBJECT: <u>Childrens</u> Edu (Name of Corporation	CAtion Foundation - must include suffix)	Inc
Dear Sir or Madam:	,	
The enclosed "Application by Foreign Not for Profit Affairs in Florida", "Certificate of Existence", and cl not for profit corporation to conduct its affairs in Flo Please return all correspondence concerning this mat	neck are submitted to regist rida.	er the above referenced <b>00040775091</b> -04/25/0101068002
Grand Jo	11 <i>4 3</i>	*****87.50 ****87.50
(Name of	Person)	<u> </u>
Cleo Juc (Firm/Co		
(Firm/Co 1221 Brickell Ave (Addr		
MANI, Florida 33	13/	
(City/State an For further information concerning this matter, please <u>Geoise Jour</u> at ( (Name of Person)	1 /	ARY OF S OF S OF S OF S OF S OF S OF S OF S
<b>STREET ADDRESS:</b> Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	MAILING ADDRESS Registration Section Division of Corporatior P. O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:		-
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#### APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

#### IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Childrens Education Foundation Inc.
1. <u>Childrens Education Foundation Tuc.</u> (Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. Delawar 3
4
6(Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)
7. <u>1221</u> Brickell Ave # 900, Miani, Fl 3313/ (Principal office address)
(Current mailing address)
8. <u>NON profit working with under privledged vorth</u> (Purpose(s) of corporation authorized in home state or country to be carried out in/the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: <u>George Jours</u>
Name: <u>Geoise Jours</u> Office Address: <u>1221 Brickell Ave 4900</u>
MIAMI (City), Florida <u>3313/</u> (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.



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 addresses of officers and/or directors:

#### A. DIRECTORS

......

Chairman: George Jong
Address: 1221 Bruccell Ave # 900, MIAM, Fl 33/3/
Vice Chairman: DAWN Scott
Address: <u>3054 Centre 54</u>
MIAM, FI 33131
Director:
Address:
Director:
Address:
B. OFFICERS
President: Belinia Hurt
Address: 1500 OCEAN Drive, # 301, MIANI, FI 33130
Vice President: LISA GASI
Address: 3710 MICANOPY, MIAMI, F/ 33139
Secretary: Robert FINE
Address: <u>801 Brickell Ave, # 427, Miani, Fl 33/3/</u>
Treasurer: Brittan, Martin
Address: 827 Brickell Ave, # 411, MIAMi, #1,33131
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. <u><math>G</math> to ise Jones / Exclusion by order listed in number 12 of the application)</u> (Typed or printed name and capacity of person signing application)
(xyped or printed name and capacity of person signing application)



I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHILDREN'S EDUCATION FOUNDATION INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF MARCH, A.D. 2001.



Darriet Smith Windson Harriet Smith Windsor, Secretary of State

Harriet Smith Windson, Secretary of Sauce

AUTHENTICATION: 1047477

DATE: 03-27-01

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