F10000000346

(Requesto	or's Name)	
. (Address)		
(Address)		
(City/State	e/Zip/Phone #)	
PICK-UP	WAIT [MAIL
(Business	Entity Name)	
(Documer	it Number)	
Certified Copies	Certificates of Sta	atus
Special Instructions to Filing	Officer:	
		·

Office Use Only



900166329049

01/21/10--01036--019 **87.50

TALLAHASSEE FLORIDA

MRD 22

COVER LETTER

TO: New Filing Section Division of Corporations		
•		
SUBJECT: centro de idiomas privado.corp Name of corpor	ation - must include suffix	
•		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact by		
Please return all correspondence concerning this m	natter to the following:	
Leticia Montero	•	
Nam	e of Person	
centro de idiomas privado.corp		
Firm	/Company	
1129 Mission Ridge Ct		
A	Address	
Orlando, FI 32835		
City/St	ate and Zip code	
castanedamontero@hotmail.com		
E-mail address: (to be u	sed for future annual report notification)	
For further information concerning this matter, plea	ase call;	
Virginia Cooper at (720	չ 364 9676	
	rea Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
New Filing Section	New Filing Section	
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327		
2661 Executive Center Circle Tallahassee, FL 32314		
Tallahassee, FL 32301		
Enclosed is a check for the following amount:		
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy 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. centro de idior	nas privado.com			_
	corporation; must include "INCORPORAT corp," "Inc," "Co," or "Corp.")	TED	," "COMPANY," "CORPORATION,"	
(If name unavai	able in Florida, enter alternate corporate n	ame	adopted for the purpose of transacting business in Florida	<u> </u>
2. Colorado	under the law of which it is incorporated)	_ 3.	80-0018371 (FEI number, if applicable)	_
•	and the law of whom it is more polarity	_		
4. 03/06/2000 (Date	e of incorporation)	_ 5.	Perpetual (Duration: Year corp. will cease to exist or "perpetual")	_
·	range Blossom Trail, Orlando Fl. 3280	Q	`	
6. 7130 Codar C			in Florida, if prior to registration)	-
	•		502, F.S., to determine penalty liability)	
7.7130 South Ora	ange Blossom Trail, Orlando Fl. 32809			
	(Principal office	ado	fress)	
1129 Mission F	Ridge Ct Orlando Fl 32835			
	(Current mailing	ado	iress)	
8. English Secon				_
(Purpose(s) of corporation authorized in home state	or c	ountry to be carried out in state of Florida)	
9. Name and street	et address of Florida registered agent:	(P.	O. Box NOT acceptable)	
Name:	Leticia Montero			9000000
· ·			2	A CONTRACTOR
Office Address:	1129 Mission Ridge Ct			2
	Orlando		, Florida 32835	٠ د
	(City)		(Zip code)	ال سيد
10 Parietavad a	gent's acceptance:		D.T.	9
	-	erv	ice of process for the above stated corporation at the	place
designated in this	application, I hereby accept the appo	oint	ment as registered agent and agree to act in this cap	acity. I
	omply with the provisions of all statu with and accept the obligations of m		relative to the proper and complete performance of n spition as registered agent	ny duties
una 1 um jamutai	, wan and accept the voilgations of hi	y pr	Suin as regimered agent.	
		, ,	/ /	
	Leticia K	1	nlero	
	(Registered agent's signal	ture		

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.

Names and busing	ness addresses o	or orncers and/o	or directors:
------------------------------------	------------------	------------------	---------------

A. DIRECTORS	The state of the s
Chairman:	10 JAN 21 PH 3: 52
Address:	OF America.
	TALLAHASSEE, FLORIDA
Vice Chairman:	
Address:	
Director:	•
Address:	
Director:	
Address:	
B. OFFICERS	
President: Virginia I Cooper	

President:	Virginia I Cooper CO: 6380 W 39 Ave Wheat Ridge 80033
Address:	6380 W 39 Ave Wheat Ridge 80033
Vice Presi	ident:
Secretary:	

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

(Signature of Director or Officer listed in number 12 of the application)

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

10 JAN 21 PH 3: 52

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

SERRE LANT OF STATE

CERTIFICATE

I, Bernie Buescher, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

centro de idiomas privado.corp

is a Corporation formed or registered on 03/06/2000 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20001047064.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 01/11/2010 that have been posted, and by documents delivered to this office electronically through 01/14/2010 @ 09:49:07.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 01/14/2010 @ 09:49:07 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 7547830.



Secretary of State of the State of Colorado

*********End of Certificate*************

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click Business Center and select "Frequently Asked Questions."