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COVER LETTER

Division of						
SUBJECT: Rea	ading and	Language Arts Cer	nter , Inc.			
		Name of	corporation	- must inclu	ide suffix	
Dear Sir or Mada	m:					
•	istence,	or "Certificate o	f Good Stan	ding" and cl	heck are sul	nct Business in Florida," bmitted to register the
Please return all c	orrespor	dence concerning	g this matter	to the follo	wing:	
Sherry Toggweiler	_	<u> </u>			<u> </u>	
			Name of	Person		
Reading and Langu	iage Arts	Center, Inc.				
			Firm/Com	pany		
1409 Allen Drive,	Suite F					
·		•	Addre	:ss		.
Troy, MI 48083						
sherry.toggweiler@)brainspr		City/State a	nd Zip code		
		E-mail address: (to be used f	or future an	nual report	notification)
For further inform	nation co	ncerning this mat	ter, please c	all:		
Sherry Toggweiler			248	971-6006		
Name of	Person	al	Area Cod	e Da	ytime Telep	phone Number
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 chec	ck for th	e following amou	nt:			
対 . \$70.00 Filing	Fee (\$78.75 Filing I Certificate of		\$78.75 Fil Certified (_	S87.50 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.

	rporation; must include "INCORPORATED." rp." "Inc," "Co," or "Corp.")	COMPANT. COM GRATION.			
(If name unavaila Michigan	ble in Florida, enter alternate corporate name a	dopted for the purpose of transacting but 38-3116098	siness in Florida)		
	3.				
March 19, 1993	y under the law of which it is incorporated)				
(Date	of incorporation)	(Date of duration, if other than	(Date of duration, if other than perpetual)		
	Suite F. Troy, MI 48083 (Princip	al office address)			
	(Current mailin	g address, if different)	18 DEC		
i. Name and stree	t address of Florida registered agent: (P.C	. Box <u>NOT</u> acceptable)	له الله		
Name:	REGISTERED AGENTS INC.		土		
Office Address:	3030 N. Rocky Point Drive, STE 1	50A	AH 6: 25		
	TAMPA	 , _{Florida} 33607			
	(City)	(Zip code)			

9. Registered agent's acceptance:

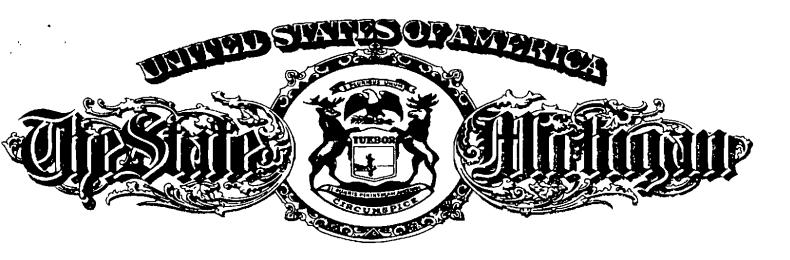
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Bill Havre/Secretary/Registered Agents Inc.

(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: _____ **B. OFFICERS** President: Evelyn Peter Address: 1409 Allen Drive, Suite F Troy, MI 48083 Vice President: Brigitte Crawford Address: 1409 Allen Drive, Suite F Trov, MI 48083 Secretary: Evelyn Peter Address: 1409 Allen Drive, Suite F, Troy, MI 48083 Treasurer: Evelvn Peter Address: 1409 Allen Drive, Suite F. Trov, M1 48083 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Kagon 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.c (Typed or printed name and capacity of person signing application)



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

READING AND LANGUAGE ARTS CENTER, INC.

was validly incorporated on March 19, 1993 as a Michigan DOMESTIC PROFIT CORPORATION, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284 to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by electronic transmission

Certificate Number: 18119458940

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 28th day of November, 2018.

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau

Verify this certificate at: URL to eCertificate Verification Search http://www.michigan.gov/corpverifycertificate.