NOQ000000128

TRANSMITTAL LETTER



Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 S.M.I.L.E. Educational Services, Inc.

(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status □\$78.75

Filing Fee & Certified Copy \$87.50

Filing Fee, Certified Copy & Certificate

_ _ ____

ADDITIONAL COPY REQUIRED

FROM: Gina Navarro

Name (Printed or typed)

1703 Arezzo Circle

Address

Boynton Black, FLovida 33436

City, State & Zip

(501) 740-4759

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

UZ JAN -7
The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Confidence of Incorporation: APTICLE I. NAME
ARTICLE I NAME
The name of the corporation shall be: S.M.I.L.E. Youth Services, Inc.
ARTICLE 2 PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 1703 Arezzo Circle Boynton Beach, Florida 33436
ARTICLE III PURPOSE(S) The specific purpose(s) for which the corporation is organized is (are): Provide educational support and/or enrichment activities that will significantly impact the lives of children.
ARTICLE IV MANNER OF ELECTION OF DIRECTORS The manner in which the directors are elected or appointed is: Members volunteered to serve on the Board.
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: Gina Navarro 1703 Arezzo Circle Boynton Beach, Florida 33436
ARTICLE VI INCORPORATOR The name and address of the Incorporator to these Articles of Incorporation are: Gina Navarro 1703 Arezzo Circle Boynton Beach, Florida 33436 2/a/02
Signature/Incorporator 2/3/02 Date

Having 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 the obligations of my position as a registered agent.

Signature/Registered Agent Date