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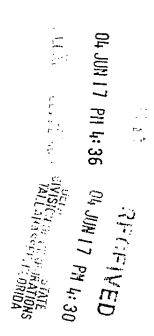
| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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10/17/04

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

| SUBJECT: Academy Of | Dreams, Inc. (PROPOSED CORPORA) | TE NAME – <u>MUST INCLU</u> | DE SUFFIX) |
|----------------------------|--|-------------------------------------|--|
| Enclosed is an original an | nd one(1) copy of the Arti | cles of Incorporation and a | 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: | Angela Darien Name (P | rinted or typed) | _ |
| | 3411 N. 29th Street Address | | _ |
| | Tampa, Florida 33605 | State & Zip | _ |
| , | City, (813) 248-1511 | State & Zip | |

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

Daytime Telephone number

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: Academy of Dreams, Inc.

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ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 3411 N. 29th Street Tampa, Florida 33605

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: A Private School

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed: Shall be stated in the by-laws

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s): Angela Darien 13003 A Thomasville Circle Tampa, Florida 33617 (P)

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

Cherylene Levy 4411 N. 48th Street Tampa, Florida 33610

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Angela Darien 13003 A Thomasville Circle Tampa, Florida 33617

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.

ignature/Registered Agent 1 Cen Signature/Incorporator