N05000005663

| (Requestor | 's Name) | | |
|---|------------------------|--|--|
| (Address) | | | |
| (Address) | | | |
| (City/State | Zip/Phone #) | | |
| PICK-UP | WAIT MAIL | | |
| (Business | Entity Name) | | |
| (Document Number) | | | |
| Certified Copies C | Certificates of Status | | |
| Special Instructions to Filing Officer: | | | |
| Georgia C. Parhame TO CORRECT ALLUCES DATE 15:2-05 | | | |
| DOO. BIAM T3 | | | |

Office Use Only



000054506140

05/16/05--01030--017 **78.75

05 JUN -1 AM 8: 47
SLORETARY OF STATE
SLORETARY OF STATE

L'anch Inn 5 5002

TRANSMITTAL LETTER

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

| SUBJECT: | 7/C2 1 | INC. | |
|-----------------|-----------------|-------------------------------|------|
| -, - | (PROPOSED CORPO | DRATE NAME - MUST INCLUDE SUI | TIX) |
| | | | |
| | | | |

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

\$70.00 Filing Fee

\$78.75 Filing Fec &

Certificate of

Status

\$78.75

Filing Fee & Certified Copy \$87.50

Filing Fec, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Georgia Park
Name (Printed or typed) 1366 Half Man Trail Jacksonville Fla. 32223 904) 268-3265
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 17, 2005

GEORGIA PARK 1366 HALF MOON TRIAL JACKSONVILLE, FL 32223

SUBJECT: TLC2, INC.

Ref. Number: W05000024674

We have received your document for TLC2, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Subsequent directors may be elected or appointed by directors, but the initial board must be appointed or elected by the founders, incorporators etc.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch Document Specialist New Filings Section

Letter Number: 105A00035176

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

ARTICLE I NAME

The name of the corporation shall be:

| | _ | · 'LEU |
|--|---|--|
| The name of the corporation shall be: | TLC2, INC. | 05 JUN -1 AM 8: 48 |
| | | SECRETARY |
| ARTICLE II PRINCIPAL OFFIC | CE CE | TALL AHASSET OF STATE |
| The principal place of business and mai | | SECRETARY OF STATE TALLAHASSEE, FLORIDA |
| 13/06 Half | Moon Tonil | |
| Jacksony | Moon Trail lle, Florida 3222 | 3 |
| ARTICLE III PURPOSE | 1109,1011010000 | _ |
| The purpose for which the corporation is and leader ship quaprograming, teaching | is organized is: fo aramate | character values |
| and leadership aug | litles in school-age | children the wal |
| programing teachi | na- and nasitive sol | e-moren Through |
| 7,00,000 | . 19 acros positive to | ic-modelings |
| ARTICLE IV MANNER OF ELE | CTION | v |
| The manner in which the directors are e | elected or appointed: $\ell \omega \propto m$ | aiority vote |
| The manner in which the directors are e of the existing | directors, exect for | or the initial |
| | Il be appointed by | |
| an octor o, with wi | " be appointed by | The Tourister, |
| ARTICLE V INITIAL DIRECTO List name(s), address(cs) and specific ti | PS AND/OR OFFICERS | ! \ |
| List name(s), address(cs) and specific ti | tle(s): Address | Title cksonville, Fla. 32223 - Preside |
| Georgia C. Park | 366 Half Moon Trail, Jan | cksonville, Fla, 32223 - Heside |
| Mala Se Brancia = 3 | COOR Forcest Circle | Jacksonville, Fla. 32257: Vice |
| Melanie Drown 3 | JUDI FOREST CHECK | pre pre |
| | | u =1 = 1 |
| Christopher S. Park 13 | 366 Half Moon Trail, Jack | Ksonville, Fla. 32223: Secretar |
| ARTICLE VI INITIAL REGISTI | <u>ERED AGENT AND STREET AD</u> | DRESS |
| The name and Florida street address | (P.O. Box NOT acceptable) of the reg | istered agent is: |
| Christopher S. Park | | |
| 1366 Half Moon Trail | | |
| Jacksonuille, Fla. 322 | 23 | - |
| ARTICLE VII INCORPORATOR | | |
| The name and address of the Incorpora | ator is: | |
| Georgia C. Park 1366 Half Moon Trail | · · | • |
| 1366 Half Moon Trail | - | |
| Jacksoriville, Fla. 322 | | |
| Having been named as registered agent to acc | ************************************** | |
| in this certificate, I am familiar with and accep | pt the appointment as registered agent an | d agree to act in this capacity. |
| (1) / 2 2 1 1 1 | | -1.1 |
| (Storting & V | are | 3/10/05 |
| Signature/Registered Agent | | Date |
| Marris a O 1- | | -1.1 |
| Diorgia C. Park | | - 3/10/05 |
| Signature/Incorporator | | Daté |
| | | |