

N06 000001557

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

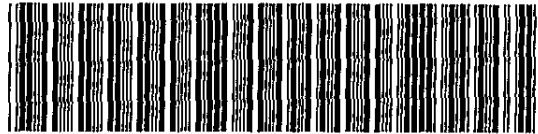
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600064369966

02/08/06 - 011025 - 006 **87.50

FILED

06 FEB -8 AM 9:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHITE FEB 15 2006

COVER LETTER

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

SUBJECT: Nesper 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: David Nesper, Ed. D
Name (Printed or typed)

1480 Southwind Dr.
Address

Casselberry, FL 32707
City, State & Zip

407-696-0893
Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

FILED

ARTICLE I NAME

The name of the corporation shall be:

Nesper Educational Services, Inc.

06 FEB -8 AM 9:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1480 Southwind Dr.
Casselberry, FL 32707

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide education services for home school families and schools, including instruction, curriculum recommendations, testing, record keeping, and other related services.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Directors will be appointed by the Chief Operating Officer.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Dr. David Nesper, Director and Chief Operating Officer 1480 Southwind Dr. Casselberry, FL 32707	Susan M. Nesper, Director 1480 Southwind Dr. Casselberry, FL 32707	Gail C. Nesper, Director 451 Eagle Circle North Casselberry, FL 32707
--	--	---

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Dr. David Nesper
1480 Southwind Dr.
Casselberry, FL 32707

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dr. David Nesper
1480 Southwind Dr.
Casselberry, FL 32707

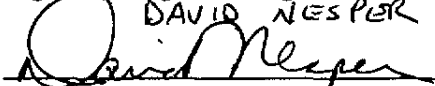
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.


Signature/Registered Agent

DAVID NESPER

Feb. 6, 2006

Date


Signature/Incorporator

DAVID NESPER

Feb. 6, 2006

Date