

No6000002218

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

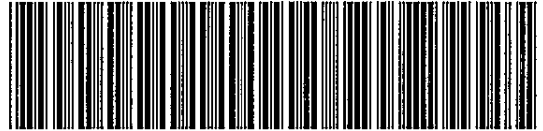
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

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

SUBJECT: John Paul II: School of Polish Language & Culture, 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: Malgorzata Andraka
Name (Printed or typed)

10504 SW 17th PL
Address

Gainesville, FL 32607
City, State & Zip

(352) 331-1373
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)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

John Paul II: School of Polish Language & Culture, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Physical: 10900 SW 24th Ave. Gainesville, FL 32607

Mailing: 10504 SW 17th PL Gainesville, FL 32607

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This supplementary school will teach Polish language and culture.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

The members of the school elect the directors of the corporation.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Director: Malgorzata Andraka, 10504 SW 17th PL Gainesville, FL 32607 (School Principal)

Director: Barbara Andraka, 10504 SW 17th PL Gainesville, FL 32607 (Assistant Principal)

Director: Bohdan Andraka, 10504 SW 17th PL Gainesville, FL 32607 (Treasurer)

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Barbara Andraka
10504 SW 17th PL
Gainesville, FL 32607

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Barbara Andraka
10504 SW 17th PL
Gainesville, FL 32607

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.

Barbara Andraka
Signature/Registered Agent

February 23, 2006

Date

Barbara Andraka
Signature/Incorporator

February 23, 2006

Date