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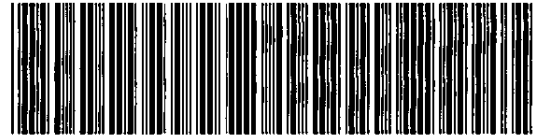
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 NOV 24 AM 11:39

FILED

J. Stivers NOV 30 2010

COVER LETTER

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

SUBJECT: HIGH DAY Home School Co-op, 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: Kathryn MacLeod
Name (Printed or typed)

14203 Winterset Dr
Address

Orlando FL 32832
City, State & Zip

407-382-9667
Daytime Telephone number

Kathy.macleod@ccci.org
E-mail address (to be used for future annual report notification)

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: H164 Day Home School Co-op, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

4000 South Conway Rd
Orlando FL 32812

Mailing address, if different is:

14203 Winterset Dr
Orlando, FL 32832

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide Christian home schooling families in Orlando, Florida, enrichment classes for grades K-12 and a preschool program for younger siblings.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

The members of the Board of Directors are appointed by the current Board of Directors.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Anne Bridgforth
Address: 873 Crystal Bay Ln
Orlando, FL 32828

Name and Title: _____
Address: _____

Name and Title: Shannon Hand
Address: 11652 Deer Path Wy
Orlando FL 32832

Name and Title: _____
Address: _____

Name and Title: Kathy MacLeod
Address: 14203 Winterset Dr
Orlando FL 32832

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Kathy MacLeod
Address: 14203 Winterset Dr
Orlando FL 32832

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Kathy MacLeod
Address: 14203 Winterset Dr
Orlando FL 32832

Article VIII Effective Date:

The effective date of the incorporation of H164 Day Home School Co-op, Inc., is January 1, 2011.

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

Kathryn E. MacLeod

Required Signature of Registered Agent

Kathryn E. MacLeod

11/21/10

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Kathryn E. MacLeod

Required Signature of Incorporator

11/21/10

Date