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COVER LETTER

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

_{SUBJECT:} Explo	ring the eleMEnT	S, Inc.		
· .	(PROPOSED CORPORAT	E NAME – <u>MUST INCL</u> I	JDE SUFFIX)	
England is an original	and ana (1) agos of the Artic	ules of Incomposition an	t 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 OPY REQUIRED	
FROM: Pamela S. Chapman Name (Printed or typed)				
4320 Deerwood Lake Parkway Suite 101-137 Address				
Jacksonville, FL 32216 City, State & Zip				
	757-576-5378			

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

4320 Dedrestarcakel phone youmber

Pam.Chapman22@gmail.com
E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION

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

ARTICLE I The name of the co	NAME Exploring the EleMEnTS proporation shall be:	S, Inc.		
ARTICLE II	PRINCIPAL OFFICE			
	Principal street address		Mailing address, if different is:	
	4320 Deerwood Lake Parkway	-		
	Suite 101-137	-		
	Jacksonviile Fl 32216	-		
ARTICLE III	PURPOSE			
	which the corporation is organized is:			
technology, engineerii This corporation is org exempt organizations corporation, assets sh	for which this corporation is organized is to increase and empowing, and mathematics (STEM) through workshops, day camps, seganized and operated exclusively for educational purposes, incluunder section 501 (c)(3) of the Internal Revenue Code, or the coally be distributed for one or more exempt purposes within the medeeral tax code, or shall be distributed to the federal government	eminars, ding, for such purpos presponding section eaning of section 501	ses, the making of distributions to organizations that qualify as of any future federal tax code. Upon the dissolution of the (c)(3) of the Internal Revenue Code, or the corresponding	
ARTICLE IV	MANNER OF ELECTION The manner in w	hich the directors	s are elected and appointed:	
	appointed as indicated in corporation		••	
	• •	•		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR itle: Passala B. Chapman, Director of Edence and Urban Education Advancement	is. Name and Title	Thomas O. Roberts, Director of Engineering and Innovation	
Address:	4320 Deerwood Lake Parkway		4320 Deerwood Lake Parkway	
11444 400.	Suite 101-137	710014007	Suite 101-137	
	Jacksonville, FL 32216		Jacksonville, FL 32216	
\. \.	N.A. Turninka O Cidara Diseases of Mathematical Affairs	NT 4 70741.		
Name and T Address:	itle: Tyneisha S. Siders, Director of Mathematical Affairs			
Address.	4320 Deerwood Lake Parkway Suite 101-137	Address.		
	Jacksonville, FL32216			
	itle:		P:	
Address:		Address:		
ARTICLE VI	REGISTERED AGENT		三公 5	
	orida street address (P.O. Box NOT acceptable) of	the registered age	nt is: 三岛 o n	
Name:	Pamela S. Chapman	•	当	
Address:	4320 Deerwoood Lake Parkway Suite 101-137		が名 2 E	
	Jacksonville, FL 32216		到15 · 0 · 0	
	OCCUPATION I E CAR I C		開発量し	
ARTICLE VII	INCORPORATOR		ES W	
	dress of the Incorporator is:			
Name:	Pamela S. Chapman 4320 Deerwood Lake Parkway		Eth. O	
Address:	Suite 101-137			
	Jacksonville, FL 32216			
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 Amelia				
i.	Required Signature of Registered Agent		/ Date/	
I submit/his 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 9 third degree felony as provided for in s.817.155, F.S.				
Jame	le S. Chonen	•	12/28/2010	
1	Required Signature of Incorporator		Date	