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COVER LETTER

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

\$70.00

Filing Fee

SUBJECT: Friternational Whon Education Consultant, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

\$78.75

Filing Fee

& Certified Copy

\$87.50

Filing Fee,

Certified Copy & Certificate

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

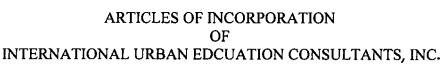
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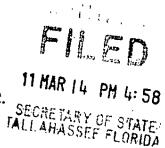
Certificate of

Status

<u></u>	ADDITIONAL COPY REQUIRED
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FROM: Klastrelle Long- Name (Printed)	or typed)
P.D BOX 694	Das
Address	3
MIAMI FC 335 City, State 8	LGP Zip
305-775-5140	
Daytime Telepho	ne number
Freue long Cac	annual report potification)

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





ARTICLE I

NAME: The name of this corporation is INTERNATIONAL URBAN EDUCATION CONSULTANTS, INC.

ARTICLE II

PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS:

Principal Place of business address: 17300 NW 32 AVENUE MIAMI, FL 33056 Mailing address 17300 NW 32 AVENUE MIAMI, FL 33056

ARTICLE III

This nonprofit corporation is organized and operated exclusively for tax exempt purposes as a educational and charitable organization under Florida not for profit corporation act and including, for such purposes, the making of distributions under Section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code. The purpose of the organization is to assist and support individuals in pursuit of a better life.

Notwithstanding any other provision of these Articles, the corporation shall not carry on any other activities not permitted to be carried on by a corporation exempt from federal income tax under Section 501 (c)(3) of the Internal Revenue Code.

No substantial part of the activities of this corporation shall consist of carrying on propaganda or otherwise attempting to influence legislation; nor shall the corporation participate or intervene in any political campaign (including the publishing or distribution of statements) on behalf of any candidate for public office.

ARTICLE IV

The manner in which directors are elected or appointed is: As provided for in the bylaws.

ARTICLE V

The names and addresses of initial Board of Directors of this corporation are:

PRESIDENT TREASURER SECRETARY
Carlos Quitnney, Jr. Charles Harrington Candis Quitnney
POBOX 694205 POBOX 694205 POBOX 694205
Miami FL 33269 Miami FL 33269

ARTICLE VI

The Registered Agent is: Klautrelle Long

17300 NW 32 Avenue Miami, FL 33056

ARTICLE VII

The name and address of Incorporator is: Klautrelle Long

17300 NW 32 Avenue Miami, FL 33056

ARTICLE VIII

- A. The property of this Corporation is irrevocably dedicated to charitable purposes and no part of the net income or assets of the corporation shall ever inure to the benefit of any director, trustee, member or officer of this corporation, or to any private person.
- B. Upon the dissolution or winding up of the corporation, any assets remaining after payment of, or provision for payment of, all debts and liabilities shall be distributed to a governmental entity described in Section 170(b)(1) (A)(v) of the Internal Revenue Code, or to a nonprofit fund, foundation, or corporation which is organized and operated exclusively for charitable purposes, which has established its tax exempt status under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to state or local government, for a public purpose. Any such assets not disposed of shall be disposed of by a court of competent jurisdiction of the county in which the principal office of the organization is then located, exclusively for such purposes or to such organization or organizations, as said court shall determine, which are organized and operated exclusively for such purposes.

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 of Registered Agent

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.

Signature of Registered Agent

Date

3/11/2011