

N11000011714

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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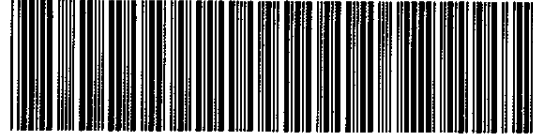
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 12/22/11

COVER LETTER

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

SUBJECT: Graham Private Christian High School 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: Graham Private Christian School Inc.
Name (Printed or typed)

1359 summit Pines Blvd. Bldg.4217
Address

West Palm Beach FL.
City, State & Zip

33415
1359 summit Pines Blvd. Bldg. 4217

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

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:

Graham private Christian High School Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1359 summit pines Blvd Bldg.4217

West Palm Beach Florida

33415

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Secular Education, and Christian education Instruction and Training

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

DIRECTORS WILL BE ELECTED AS STATED IN THE BYLAWS.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ola Starling P.

Address: 1359 Summit Pines Blvd Bldg 4217
west Palm Beach Fl.
33415

Name and Title: Euphemia Graham Tres

Address: 832 Hill Dr.Bldg. G
West Palm Beach Fl
33415

Name and Title: Louis C. Graham vice P.

Address: 1359 Summit Pines Blvd Bldg 4217
West Palm Beach Fl.
33415

Name and Title: _____

Address: _____

Name and Title: Angelica Graham SEC

Address: 832 Hill Dr. Bldg. G
West Palm Beach Fl.
33415

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: Ola Starling

Address: 1359 Summit Pines Blvd.Bldg.4217
West Palm Beach Fl
33415

ARTICLE VII INCORPORATOR

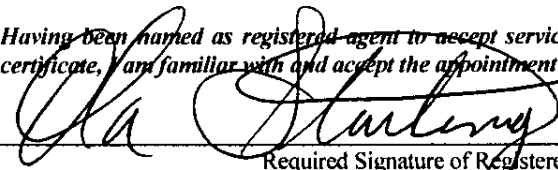
The name and address of the Incorporator is:

Name: Ola Starling

Address: 1359 Summit Pines Blvd.Bldg.4217
West Palm Beach Fl.
33415

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

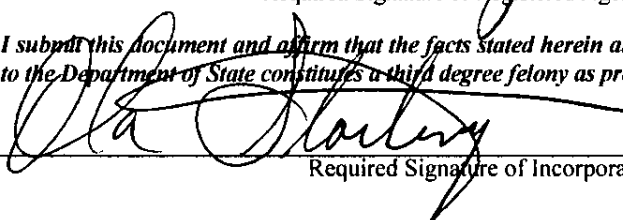


Required Signature of Registered Agent

12/13/2011

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.



Required Signature of Incorporator

12/13/2011

Date