

N12000003545

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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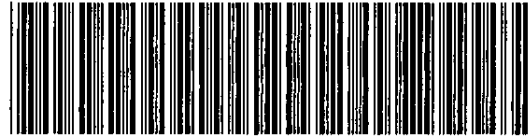
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03/22/12--01033--011 \*\*137.50

W12-16951

SECRETARY OF STATE  
DEPT. OF REVENUE  
HARRISBURG, PA 17104

12 APR -4 PM 4:15

FILED

2 APR 5 2012

## COVER LETTER

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

**SUBJECT:** Domestication of Seminole Montessori School, Inc.

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

**FEES:**

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	<u>\$78.75</u>
Total to domesticate and file	<b>\$128.75</b>

**OPTIONAL:**

Certificate of Status	\$ 8.75
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Cynthia Thomas  
Name (printed or typed)

PO Box 372478  
Address

Satellite Beach, FL 32937-0478  
City, State & Zip

321-779-0031  
Daytime Telephone Number

cindy@montessorischools.org  
E-mail address: (to be used for future annual report notification)



RECEIVED

12 APR -4 AM 11:46

SECRETARY OF STATE  
FLORIDA DEPARTMENT OF STATE-FLORIDA  
Division of Corporations

March 26, 2012

CYNTHIA THOMAS  
PO BOX 372478  
SATELLITE BEACH, FL 32937-0478

SUBJECT: SEMINOLE MONTESSORI SCHOOL, INC.  
Ref. Number: W12000016851

We have received your document for SEMINOLE MONTESSORI SCHOOL, INC. and your check(s) totaling \$137.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch  
Regulatory Specialist II  
New Filing Section

Letter Number: 712A00010164

**NOT FOR PROFIT  
CERTIFICATE OF DOMESTICATION**

The undersigned, Cynthia Thomas, CEO  
(Name) (Title)  
of Seminole Montessori School, Inc. a foreign Corporation  
(Corporation Name)  
in accordance with section 617.1803, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was September 13, 1982.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was State of Georgia, USA.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Seminole Montessori School, Inc..
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 617.01201 and 617.0202 with this certificate is Seminole Montessori School, Inc.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was State of Georgia, USA.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 617.1803.

I am CEO, of Seminole Montessori School, Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 20th day of March, 2012.

  
(Authorized Signature)

<b>Filing Fee:</b>	
<b>Certificate of Domestication</b>	<b>\$50.00</b>
<b>Articles of Incorporation and Certified Copy</b>	<b>\$78.75</b>
<b>Total to domesticate and file</b>	<b>\$128.75</b>

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S. (Not for Profit)

**ARTICLE I      NAME**

The name of the corporation shall be:

Seminole Montessori School, Inc.

**ARTICLE II      PRINCIPAL OFFICE**

The principal place of business/mailling address shall be:

Principal Office: 1240 Banana River Drive, Indian Harbour Beach, FL 32937

Mailing Address: PO Box 372478, Satellite Beach, FL 32937-0478

**ARTICLE III      PURPOSE**

The purpose for which the corporation is organized: Charitable and Educational Purposes

**ARTICLE IV      MANNER OF ELECTION**

The manner in which the directors are elected or appointed: By nomination and vote.

**ARTICLE V      INITIAL DIRECTORS AND/ OR OFFICERS**

The name(s) and address(es) and specific title(s):

Cynthia Thomas, CEO and Secretary, 1240 Banana River Drive, Indian Harbour Beach, FL 32937

Albert Thomas, CFO, 1240 Banana River Drive, Indian Harbour Beach, FL 32937

**ARTICLE VI      INITIAL REGISTERED AGENT AND STREET ADDRESS**

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


Cynthia Thomas 1240 Banana River Drive, Indian Harbour Beach, FL 32937

**ARTICLE VII      INCORPORATOR**

The name and address of the incorporator is:

Cynthia Thomas, 1240 Banana River Drive, Indian Harbour Beach, FL 32937

\*\*\*\*\*  
Having been named as registered agent and 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/Registered Agent

April 2, 2012  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

April 2, 2012  
\_\_\_\_\_  
Date

RECEIVED  
STATE OF FLORIDA  
12 APR -4 PM 4:15