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(Re	equestor's Name)				
(Address)					
· (Address)					
(Ci	ty/State/Zip/Phone	: #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
	,				

Office Use Only



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05/16/12--01010--025 **78.75

TALLAHASSEE, FINATE

MP /13/12

COVER LETTER

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

SUBJECT: NEW AGE Education Consultants
(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 \$78.75 \$87.50 \$87.50 Filing Fee & Certificate of Status

\$Certificate of & Certified Copy & Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

PING WU

Name (Printed or typed)

6408 Mallard Trace Dr.

Address

Tallahassee, FL 32-312—

City, State & Zip

1-850-339-2389

Daytime Telephone number

Monagement @ Newage education. Org E-mail address: (to be used for future annual report notification)

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



MECEINED

12 JUN -7 PH 1: 19

FLORIDA DEPARTMENT OF STATE SHABING PROBATIONS Division of Corporations

May 17, 2012

W.

PING WU 6408 MALLARD TRACE DR. TALLAHASSEE, FL 32312

SUBJECT: NEW AGE EDUCATION CONSULTANTS

Ref. Number: W12000027503

We have received your document for NEW AGE EDUCATION CONSULTANTS and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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.

Ruby Dunlap Regulatory Specialist II Letter Number: 112A00014620
New Filing Section

www.sunbiz.org

Division of Compositions DO DOV 6297 Tallahassas Florida 20214

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

ARTICLE I The name of the corp	VAME oration shall be: NEW AGE E	ducation Cons	sultants I	Inc.	
ARTICLE II P	PRINCIPAL OFFICE			-Po	
	Principal street address		Mailin	g address, if different is:	
72400 Fred Smith Rd, Apt. 104 Talla hassee, FL 32363					
ARTICLE III	<u>PURPOSE</u>				
To educate	ch the corporation is organized is: unternational Students on	the English li	anguage a	nel on how to	
interact with	in the American society He find schools to atte MANNER OF ELECTION The man	. New Age 5	ducation Co	onsultants also helps	
ARTICLE V	INITIAL OFFICERS AND/OR DIRE	CTORS			
Name and Title Address:	Ping Wu - President 6408 mellord trace Dr Tallahassee, FL 32312	Address:	2400 Fre	ibeing - Via Presidented Smith Rd, Apt. lo 2, FL 32303	
Name and Title Address:		4.11	»:		
Name and Title: Address:		Name and Title Address:	:		
	EGISTERED AGENT a street address (P.O. Box NOT acceptate Ping Wa 6408 Mallard Trace Tallahasse Tallahasse	Dr.	nt is:	12 JUN 12 SECRETARY	
ARTICLE VII II	NCORPORATOR				
The <u>name and addres</u> Name: Address;	Softhe Incorporatoris: 109 Nu 648 Mallard Trace Tallahassee, Fu 32	5r. 312		2: 12 STATE STATE	
Having been named (certificate, I am famili	as registered agent to accept service of parties are with and accept the appointment as reg	process for the above s gistered agent and agree	stated corporation to act in this cap	at the place designated in this acity	
	Ping 11h			5/18/2012	
	Required Signature of Registered Age	ent	<u></u>	Date	
I submit this documen to the Department of S	t and affirm that the facts stated herein d tate constitutes a third degree felony as p	are true. I am aware th rovided for in s.817.155	at any false inform , F.S.	mation submitted in a document	
2	2 marsh de			5/14/2012	
	Required Signature of Incorpor	ator		Date	