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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 OCT 15 AM 9:49

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J. Shivers OCT 16 2012

COVER LETTER

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

SUBJECT: Summit Community Learning 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: Jeanee Thompson
Name (Printed or typed)

6955 W. Broward Blvd
Address

Plantation, Florida 33317
City, State & Zip

954-583-9288
6955 W. Broward Blvd. phone number

jthompson@summitlearning.net
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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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: Summit Community Learning Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
6955 W. Broward Blvd.
Plantation, Florida 33317

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the corporation is to provide learning and aftercare services to children and adults of all ages.

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

Elected at the Annual Meeting

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jeanee Thompson/President
Address: 6955 W. Broward Blvd.
Plantation, Florida 33317

Name and Title: _____
Address: _____

Name and Title: Ed Cwieka/Vice President
Address: 6955 W. Broward Blvd.
Plantation, Florida 33317

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

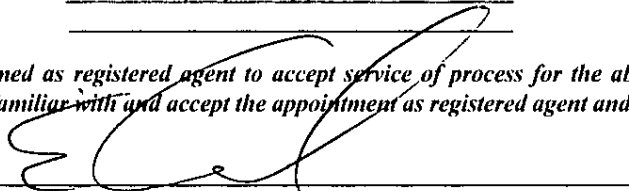
Name: Ed Cwieka
Address: 6955 W. Broward Blvd.
Plantation, Florida 33317

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ed Cwieka
Address: 6955 W. Broward Blvd.
Plantation, Florida 33317

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

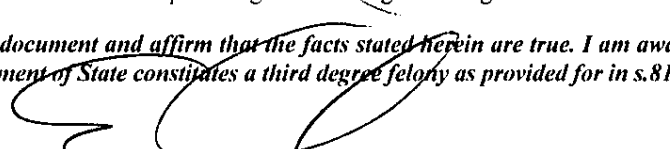


Required Signature of Registered Agent

10/5/12

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

10/5/12

Date

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TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

1. Pass a Board of Directors resolution approving the Articles of Dissolution, put in writing, and have each director sign.
2. Hold a meeting of our organization's voting members, and have them approve the Articles of Dissolution. A two-thirds majority is required for passage.
3. Present the Articles of Dissolution to the Florida Department of State.
4. Pay all of the organizations creditors in full
5. Select another tax-exempt non-profit organization to transfer any remaining assets to

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SECRETARY OF STATE
TALLAHASSEE FLORIDA