

N1300000 7335

(Requestor's Name)

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 16, 2013

CARVER LEARNING CENTER INC.
P.O. BOX 490150
LEESBURG, FL 34749

SUBJECT: CARVER LEARNING CENTER INC.
Ref. Number: W13000040007

We have received your document for CARVER LEARNING CENTER INC. and your check(s) totaling \$35.00. However, the document has not been filed and is being retained in this office for the following:

There is a balance due of \$35.00.

Please return 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.

Diane Cushing
Regulatory Specialist II Supervisor

Letter Number: 313A00017268

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

ARTICLE I NAME

The name of the corporation shall be: Carver Learning Center Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
1014 Georgia Ave.

Leesburg Fl, 34748

Mailing address, if different is:
P.O. Box 490150

Leesburg Fl, 34749

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide families with a nurturing and safe environment in which to leave their children daily.

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

They are hand picked.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gwendolyn Kelley/Administrator

Address: 8903 High St.
Yalaha Fl, 34797

Name and Title: Andrea Roberts/Director

Address: 206 Parker St.
Leesburg Fl, 34748

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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STATE OF FLORIDA

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Gwendolyn Kelley

Address: 8903 High St.
Yalaha Fl, 34797

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Andrea Roberts

Address: 206 Parker St.
Leesburg Fl, 34748

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

Gwendolyn Kelley
Required Signature of Registered Agent

7/8/2013
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.

Andrea Roberts
Required Signature of Incorporator

7/8/2013
Date

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RDA