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(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(5)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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COVER LETTER

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

SUBJECT: Trayvon M	: Trayvon Martin/Caribbean Early College Entrepreneurs High School (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
Enclosed is an original an \$70.00 Filing Fee	and one (1) copy of the Ar \$78.75 Filing Fee & Certificate of Status	ticles of Incorporation and □\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate	

FROM: Lloyd Pilgrim Spooner

Name (Printed or typed)

31 SE 7th Road

Address

Homestead, Florida 33030

City, State & Zip

305-242-4051

Daytime Telephone number

Ispoon51@bellsouth.net

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

ARTICLE I The name of the	corporation shall be: Trayvon Martin/Ca	aribbean Early College Entrepreneurs High Sch	ool, Ind	c. —		
ARTICLE II	PRINCIPAL OFFICE					
Principal <u>street</u> address: 31 SE 7th Road		Mailing address, if different is:	Mailing address, if different is:			
Hon	nestead, Florida 33030					
		e purpose for which this corporation is to K-12 grade. No part of the earnings of thi				
shall inure to	o the benefit of, or be distributive to	its members, trusties, or other private person	n, exce	ept that		
the coope	ration shall be authorized ar	nd empowered to pay reasonable cor	npen	sation		
for service	es rendered. The cooper	ation is formed as an educational	, scie	entific,		
or literary	institution within the meaning	ng of section 501 (c) (3) of the International	al Re	venue		
Code, as	amended.					
ARTICLE IV	MANNER OF ELECTION The ma	anner in which the directors are elected and appointed:		 		
As provided	d for in the bylaws.					
ARTICLE V	INITIAL OFFICERS AND/OR DII	<u>RECTORS</u>				
Name and Title	Lloyd Pilgrim Spooner, CEO	Name and Title:	.			
Address	31 SE 7th Road	Address:	_			
•	Homestead, Florida 33030		_			
			281	JE S≚S		
Name and Title		Name and Title:	VON	SION		
Address			2	TARY OF CO		
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Name and Title	:		9	<u>,</u> in		
Address			-			
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) (m) i	,	. File
	Name and Ti	le: SECRETARY OF STATE DIVISION OF CORPORATION
Address	Address:	2013 NOV 22 PM 3: 46
Name and Title:_	Name and Ti	le:
Address	Address:	
ARTICLE VI The <u>name and Fl</u> Name:	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of the re Lloyd Pilgrim Spooner	gistered agent is:
Address:	31 SE 7th Road Homestead, Florida 33030	
ARTICLE VII The name and ac	INCORPORATOR Idress of the Incorporator is:	
Name:	Lloyd Pilgrim Spooner	
Address:	31 SE 7th Road	
	Homestead, Florida 33030	
Having been nar certificate, I am f	ned as registered agent to accept service of process for amiliar with and accept the appointment as registered ag	the above stated corporation at the place designated in the ent and agree to act in this capacity
	Required Signature of Registered Agent	November 17th, 2013
	Required Signature of Registered Agent	Date
	ument and affirm that the facts stated herein are true. I a t of State constitutes a third degree felony as provided for	m aware that any false information submitted in a documer in s.817.155, F.S.
	Fland Diff 9-1	November 17th, 3013
	Required Signature of Incorporator	Date