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SECRETARY OF STATE
TALLAHASSEE FLORIDA

W1447302

COVER LETTER

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

SUBJECT: New Age Education Services 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: Ping Wu
Name (Printed or typed)

6408 Mallard Trace Dr.
Address

Tallahassee, FL 32312
City, State & Zip

850-339-2389
Daytime Telephone number

Pingwu25@hotmail.com
E-mail address: (to be used for future annual report notification)

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

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

ARTICLE I NAME

The name of the corporation shall be: New Age Education Services Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

6408 Mallard Trace Dr.
Tallahassee, FL 32312

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to Education international students
on English language and on how to interact within
the American society. New Age Education services also
helps the students find school to attend in U.S. to study

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Appointed

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ping Wu

Name and Title: _____

Address 6408 Mallard Trace

Address: _____

Tallahassee

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

14 AUG 13 PM 2:19
STATE
TALLAHASSEE 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: Ping Wu

Address: 6408 Mallard Trace Dr
Tallahassee, FL 32312

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ping Wu

Address: 6408 Mallard Trace Dr.
Tallahassee, FL 32312

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

Ping Wu

Required Signature of Registered Agent

8/14/2014

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.

Ping Wu

Required Signature of Incorporator

8/14/2014

Date

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SECRET
TALLAHASSEE, FL
DEPARTMENT OF STATE