## NSOOUL48

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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STERE LAKE OF STAFF

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

SUBJECT:	onal Advancement Center Interna	tional		
	(PROPOSED CORPO	RATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)	
Enclosed is an original a	and one (1) copy of the Artic	les of Incorporation and	a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate  PY REQUIRED	
FROM:	DR. Michael Kulik			
Name (Printed or typed)			-	
	1214 Victoria Drive			
		Address		
	West Palm Beach, FL 33406			
	Ci	City, State & Zip		
	(561) 601-9293			

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

E-mail address: (to be used for future annual report notification)

Daytime Telephone number

kulls@bellsouth.net



## FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

15 9EC - 7 AMII: 57

SECRETARY OF STATE MALLAMASSEELFI GR. 6A

November 23, 2015

DR. MICHAEL KULIK 1214 VICTORIA DR WEST PALM BEACH, FL 33406

SUBJECT: THE EDUCATIONAL ADVANCEMENT CENTER INTERNATIONAL

Ref. Number: W15000076466

We have received your document for THE EDUCATIONAL ADVANCEMENT CENTER INTERNATIONAL 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 registered agent must sign accepting the designation.

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.

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.

Jessica A Fason Regulatory Specialist II

Letter Number: 115A00024673



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 8, 2015

DR. MICHAEL KULIK 1214 VICTORIA DR WEST PALM BEACH, FL 33406

SUBJECT: THE EDUCATIONAL ADVANCEMENT CENTER INTERNATIONAL

Ref. Number: W15000076466

We have received your document for THE EDUCATIONAL ADVANCEMENT CENTER INTERNATIONAL and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

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.

Jessica A Fason Regulatory Specialist II Letter Number: 115A00024673

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassaa Florida 32314

## ARTICLES OF INCORPORATION

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

	PRINCIPAL OFFICE  Principal street address:  Victoria Drive, West Palm Beach, Fl. 3	_	ess, if different is:
ARTICLE III The purpose f	PURPOSE or which the corporation is organized is:	To teach/train others on how to educate c	
ARTICLE IV	MANNER OF ELECTION The m	nanner in which the directors are elected and	appointed by founder
ARTICLE IV  ARTICLE V  Name and Titl  Address	INITIAL OFFICERS AND/OR DIR	ECTORS  Name and Title:	
<b>ARTICLE V</b> Name and Tit	INITIAL OFFICERS AND/OR DIR  Dr, Michael Kulik - Director  1214 Victoria Drive  West Palm Beach, Fl. 33406  Tara Kulik - Assistant Director	ECTORS  Name and Title:	75 N

Name and Title:		Name and Title:			
Address		Address:	<del></del>		
_					
-					
Name and Title:		Name and Title:			
Address		Address:			
	REGISTERED AGENT rida street address (P.O. Box NOT accep	otable) of the registered agent is:			
Name:	Michael Kulik				
Address:	1214 Victoria Dr.				
	West Palm Beach, Fl. 334	406			
		<del></del>			
	INCORPORATOR  Iress of the Incorporator is:		•		
Name:	Michael Kulik	<u></u>			
Address:	1214 Victoria Dr.				
	West Palm Beach, Fl. 33	406			
ARTICLE VIII	EFFECTIVE DATE: 11/09/20	15 (OPEROVAL)			
(II au chective as	ther than the date of filing: $\frac{11/09/20}{1}$ the is listed, the date must be specific an	d cannot be more than five business days	prior or 90 business days		
after the filing.)	to a 12 al 2 file de de coma mandales en	uliushia atatutum Gilma maguinamanta thia d	ate will not be listed as the		
document's effect	ve date on the Department of State's reco	plicable statutory filing requirements, this d rds.	ate will not be fisted as the		
Having been nam	ed as registered agent to accept service	of process for the above stated corporation	at the place designated in this		
certificate, I am fo	miliar with and accept the appointment a	s registered agent and agree to act in this ca	pacity		
	Multar of Nuclear National Required Signature of Registered		1/-9-/5		
	<b>,</b>	Agent in are true. I am aware that any false infori	Date		
to the Department	of State constitutes a third degree felony	as provided for in s.817.155, F.S.	THE SHOTH SHOTH SECURITIES		
	Mullief S Ze  Regaired Signature of Incorp	<u></u>	/(-9-/5 Date		
	Regalired Signature of Incor	porator	Date		
	1				

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