## N1700000 7898

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700301810627

M. MOON JUL 3 1 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500				
ACCOUNT NO. : 12000000195				
REFERENCE: 747905 8146532				
AUTHORIZATION: Typeld He me.				
COST LIMIT : \$ 27.50				
ORDER DATE : July 31, 2017				
ORDER TIME : 4:24 PM				
ORDER NO. : 747905-005				
CUSTOMER NO: 8146532				
DOMESTIC FILING				
NAME: NORTH JACKSONVILLE STEM CHARTER SCHOOL, INC.				
EFFECTIVE DATE:				
XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
XX CERTIFIED COPY				
PLAIN STAMPED COPY  XX CERTIFICATE OF GOOD STANDING				
CONTACT PERSON: Melissa Zender - EXT.				

EXAMINER'S INITIALS:

## **COVER LETTER**

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

BJECT: North Jackso	nville STEM Charter School, Inc.  (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)		
	(		
osed is an original a	and one (1) copy of the Ar	ticles of Incorporation and	a check for :
S70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	<ul><li>          \$87.50     </li><li>         Filing Fee,         Certified Copy         &amp; Certificate     </li></ul>
	ADDITIONAL COPY REQUIR		PY REQUIRED
FROM:	Gary Montour	ane (Printed or typed)	-
	50 North Laura Street, Suite 1725		
	Address  Jacksonville, FL 32202		
	City, State & Zip		
	704-36 Day	ime Telephone number	_
	Fary Mo	r future annual report notification	Mess.
	E-mail address: (to be used for	r future annual report notificati	on)

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

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

<u>ARTICLE II</u>	PRINCIPAL OFFICE		
631	Principal <u>street</u> address: 2 Christoper Creek Road, East	Mailing address, if different 6312 Christoper Creek Road, East	is:
Jacksonville, FL 32217		Jacksonville, FL 32217	
	for which the corporation is organized is:	for charitable and educational purposes, including, for s	
<del></del>	ning and operating charter schools and doi		
ARTICLE I	V MANNER OF ELECTION The ma	nner in which the directors are elected and appointed:	s provided in the bylav
ARTICLE I	V MANNER OF ELECTION The ma	nner in which the directors are elected and appointed:	provided in the bylav
			s provided in the bylav
ARTICLE V	/ INITIAL OFFICERS AND/OR DIRE		
ARTICLE V	/ INITIAL OFFICERS AND/OR DIRE	<u>CCTORS</u>	
ARTICLE V	/ INITIAL OFFICERS AND/OR DIRE	CCTORS  Name and Title:	
ARTICLE V Name and T Address	itle:  So North Laura Street, Suite 1725  Jacksonville, FL 32202	Name and Title:Address:	
ARTICLE V Name and T Address Name and T	itle:  Gary Montour, President  50 North Laura Street, Suite 1725  Jacksonville, FL 32202  itle:  Jason Hoerr, Secretary/Treasurer  21.13 Birch Bark Drive	Name and Title:  Address:  Name and Title:	
ARTICLE V Name and T Address	itle:  Gary Montour, President  50 North Laura Street, Suite 1725  Jacksonville, FL 32202  itle:  Jason Hoerr, Secretary/Treasurer  21.13 Birch Bark Drive	Name and Title:Address:	
ARTICLE V Name and T Address Name and T Address	itle:  Gary Montour, President  50 North Laura Street, Suite 1725  Jacksonville, FL 32202  itle:  Jason Hoerr, Secretary/Treasurer  2143 Birch Bark Drive  Jacksonville, FL 32246	Name and Title:  Address:  Name and Title:	
ARTICLE V Name and T Address Name and T Address	itle: Gary Montour, President  50 North Laura Street, Suite 1725  Jacksonville, FL 32202  itle: 2143 Birch Bark Drive  Jacksonville, FL 32246  Gary Mark Tracy, Director	Name and Title:  Address:  Name and Title:  Address:	17
ARTICLE V Name and T Address Name and T Address	itle: Gary Montour, President  50 North Laura Street, Suite 1725  Jacksonville, FL 32202  itle: 2143 Birch Bark Drive  Jacksonville, FL 32246  itle: Mark Tracy, Director	Name and Title:  Address:  Name and Title:  Address:	17

Name and Title:		Name and Title:
Address		Address:
_		
Name and Title:_		Name and Title:
Address		Address:
Address		
-		
_		
	REGISTERED AGENT orida street address (P.O. Box NOT accep	table) of the registered spent is:
The hame and Fit	Corporation Service Company	nable) of the registered agent is.
Name:		
Address:	1201 Hays Street	7
	Tallahassee, FL 32301	' <del>-</del>
	<u>INCORPORATOR</u>	
The <u>name and ad</u>	dress of the Incorporator is:	
Name:	Gary Montour	
Address:	50 North Laura Street, Suite 1725	
	Jacksonville, FL 32202	
ARTICLE VIII	<i>EFFECTIVE DATE:</i> 07/31/2017	
	other than the date of filing:	
(		, , , , , , , , , , , , , , , , , , , ,
	inserted in this block does not meet the applied date on the Department of State's recon	plicable statutory filing requirements, this date will not be listed as the rds.
Having been nan certificate, I am fo Corporation Se	ned as registered agent to accept service of amiliar with and accept the appointment as rvice Company	of process for the above stated corporation at the place designated in this registered agent and agree to act in this capacity  Melissa Zender
By:	Required Senature of Registered	Agent Asst. Vice President
	. /	
	Tinent and affirm that the facts stated herei t of State constitutes a third degree felony o	in are true. I am aware that any false information submitted in a document is provided for in s.817.155, F.S.
IX.	1. 700 molta	
	Required Signature of Incore	orator Date