

N24000010149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

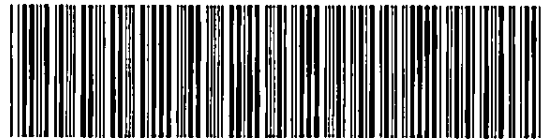
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900433031319

07/16/24--01039--001 **70.00

07/16/24--01039--003 **35.00

07/16/24--01039--004 **8.75

DEPT. OF STATE
TALLAHASSEE, FL

2024 JUL 15 AM 8:05

FILED

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation
Non-Profit

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida ~~Profit~~ Non-Profit Corporation in accordance with s. ~~607.1115~~ 607, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

ENA LEARNING ACADEMY L24000129009
Enter Name of Other Business Entity

2. The "Other Business Entity" is a Childcare Center
(Enter entity type. Example: limited liability company, limited partnership,
general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of FLORIDA
(Enter state, or if a non-U.S. entity, the name of the country)

on March 14, 2024
Enter date "Other Business Entity" was first organized, formed or incorporated

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

State of FL

4. The name of the Florida ~~Profit~~ Non-Profit Corporation as set forth in the attached Articles of Incorporation:

ENA Learning Academy INC
Enter Name of Florida Profit Corporation
Non-Profit

5. If not effective on the date of filing, enter the effective date: _____

(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

2024 JUL 15 AM 8:05
TALLAHASSEE
FILED

Signed this 12 day of July 2024

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an

Incorporator: Angeline ENA
Printed Name: Angeline ENA Title: Manager

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: Angeline ENA

Printed Name: Angeline ENA Title: Manager

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

2024 JUL 15 AM 8:05
CLERK OF
COURT
ALABAMA
STATE

10:11:20

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: ENA Learning Academy INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:

1729 Business
Center LN
Kissimmee, FL, 34758

Mailing address, if different is:

358 Colonade Ct
Kissimmee, FL, 34758

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to serve families in our
community and to nurture the potential in
every child to become a creative learner,
original thinker, and lifelong learner.

ARTICLE IV MANNER OF ELECTION

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

Annual meeting or by laws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MGR
Angeline ENA Name and Title: _____

Address: 358 Colonade Ct
Kissimmee
FL, 34758 Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

SECRETARY OF STATE
TALLAHASSEE, FL

2024 JUL 15 AM 8:05

2024 JUL 15

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: Angeline ENA
Address: 358 Colonade Ct
Kissimmee, FL 34758

ARTICLE VII. INCORPORATOR

The name and address of the Incorporator is:

Name: Angeline ENA
Address: 358 Colonade Ct
Kissimmee, FL 34758

ARTICLE VIII. EFFECTIVE DATE:

Effective date, if other than the date of filing.

(OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Angeline Ena
Required Signature of Registered Agent

07-12-2024
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.

Angeline Ena
Required Signature of Incorporator

07/12/2024
Date