## N980000000112

98 JAN 23 PH 4: 17

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

SUBJECT:	= Jucationa	te name - must include suff	ters Inc	<u> </u>
	(i loposca corpora	tte name - must menige sur	60000241 -01/26/98 *****78.	
Enclosed is an original a	and one(1) copy of the article	s of incorporation and a	check for :	
□ \$70.00 Filing Fee	4\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	1060 Ora	ted or typed)  29 on A.  ifress  tet & Zip  -2999  phone number	98 JAN 23 PM 3: 51  DIVISION OF CONDORATION  OF CONDORATION  OF CONDORATION  OF CONDORATION	RMC MC

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

## LES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation: JAN 23 PM 4: 17 <u>ARTICLE</u> I NAME SECRETARY OF STATE The name of the corporation shall be: Educational Centers ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: The specific purpose(s) for which the corporation is organized is(are): Community Schools MANNER OF ELECTION OF DIRECTORS The manner in which the directors are elected or appointed is: THE DIRECTORS SHALL BE CHATED IN THE BYLAW INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are:

The name and address of the Incorporator to these Articles of Incorporation are: 1, Nr. - 1060 oregon

Signature/Incorporator

RTICLE VI INCORPORATOR

FILED

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent