

TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 600  
Tallahassee, FL 32314

900006407569--1  
-07/15/02--01065--018  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

**SUBJECT:** Key to Learning Disabilities, LLC  
(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 of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Key to Learning disabilities, LLC  
Name (Printed or typed)

Post Office Box 948592  
Address

Maitland, FL 32794  
City, State & Zip

(321) 222-2054  
Daytime Telephone number

**FILED**  
02 SEP 20 AM 9:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

9/23



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

July 16, 2002

STEVE PALMER  
P.O. BOX 948592  
MAITLAND, FL 32794

SUBJECT: KEY TO LEARNING DISABILITIES, LLC  
Ref. Number: W02000020542

We have received your document for KEY TO LEARNING DISABILITIES, LLC. However, the document has not been filed and is being returned for the following:

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

LLC IS NOT AN ACCEPTABLE SUFFIX FOR A CORPORATION.

Please return the original and one copy of 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) 245-6934.

Loria Poole  
Corporate Specialist  
New Filings Section

Letter Number: 302A00043795

*Attached please find documents  
requested. If you should have  
further questions please call  
(863) 221-9279.*

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (profit)

ARTICLE I NAME

The name of the Corporation shall be:

Key To Learning Disabilities, INC.

ARTICLE II PRINCIPAL OFFICE:

The Principal place of business/ mailing address:

P.O. Box 948592, Maitland, Florida 32794

ARTICLE III PURPOSE:

The purpose for which the Corporation is organized

is to inform, teach and develop any and all individuals, instructors and associated aids with the training and enrichment for learning disabled. The sole key is to assist with articulate enrichment for learning disabled

ARTICLE IV SHARES:

The number of shares of stock is:

(100) One Hundred shares

ARTICLE V REGISTERED AGENT:

The name and Florida Street address of registered agent

Mr. Steve Palmer

648 Zachary Drive

Apoka, Florida 32712

ARTICLE VI INCORPORATOR

The Name and address of Incorporator:

Mr. Steve Palmer

648 Zachary Drive

Apoka, Florida 32712

\*\*\*\*\*  
Having been named as registered agent to accept services 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.



Signature/Registered Agent

7/10/02

Date



Signature/Incorporator

7/10/02

Date

FILED  
02 SEP 20 AM 9:23  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA