## P02000119360

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## TRANSMITTAL LETTER

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

Enclosed are an orig	final and one (1) copy of the arti	cles of incorporation and	l 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: StudentLink Corp.  Name (Printed or typed)  245 NORTH OCEAN BLVD., SUITE 203  Address				
				DEERFIELD BEACH FL 33441 City, State & Zip
954-427-6556  Daytime Telephone number				

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

## ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I <u>NAME</u> The name of the corporation shall be: StudentLink Corp. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 245 NORTH OCEAN BLUD., SUITE 203 DEERFIELD BEACH, FL 33441 The purpose for which the corporation is organized is: CONSOLIDATING AND REFINANCING COLLEGE LDANS ARTICLE IV SHARES The number of shares of stock is: 1000 SHARES OF COMMON STOCK @ 1.00 PAR VALUE ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): ANDREW PALUMBO 333 NORTH OCEAN BLUD., SUITE 1222 DEERFIELD BEACH, FL 33441 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: ANDREW PALUMBO 333 NORTH OCEAN BLUD. SUITE 1222 DEERFIELD BEACH, FL 33441 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: ANDREW PALUMBO 333 NORTH OCEAN BLUD., SUITE 1222 DEERFIELD BEACH, FL 33441 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

Signature/Incorporator