

P03000004519

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

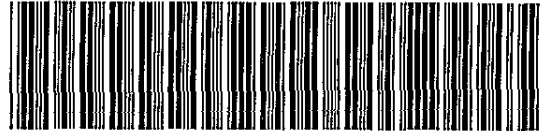
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200009755302

01/09/03--01065--003 **87.50

FILED
03 JAN -9 AM 10:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

28/6

TRANSMITTAL LETTER

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

SUBJECT: HOPKINS CONFERENCES, INC.
(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: ANGELL & ASSOCIATES
Name (Printed or typed)

1515 S. Orlando Avenue
Address

Maitland, FL 32751
City, State & Zip

407-629-4900
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)

FILED

03 JAN -9 AM 10:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

HOPKINS CONFERENCES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

1051 PARK AVE. N
WINTER PARK, FL 32789-2537

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A PROFIT ORGANIZATION GIVING SEMINARS & CONFERENCES

ARTICLE IV SHARES

The number of shares of stock is:

FIVE HUNDRED (500)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

LYNNE A. HOPKINS 1051 PARK AVE. N WINTER PARK, FL 32789-2537

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent is:

PATRICIA ANGELL (ANGELL & ASSOCIATES 1515 S. ORLANDO AVE. MAITLAND, FL 32751

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LYNNE A. HOPKINS 1051 PARK AVE. N WINTER PARK, FL 32789-2537

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

Patricia Angell
Signature/Registered Agent

11/22/02
Date

Lynne A. Hopkins
Signature/Incorporator

11/22/02
Date