

P030000 88175

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

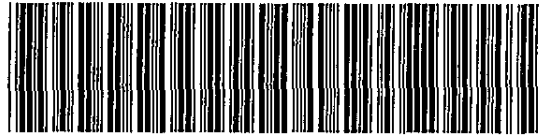
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/12/03--01016--003 **157.50

RECEIVED
03 AUG 12 AM 10:34
DIVISION OF CORPORATION

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 AUG 12 PM 12:17

EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101

Address

CORAL GABLES, FL 33134 (305) 444-4994

City/State/Zip

Phone #

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. EDXPERIENCE CONSULTING INC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☐ Walk in

☒ Pick up time

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
☒	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/ Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

Examiner's Initials

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:
EDXPERIENCE CONSULTING INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
141 CRANDON BLVD. PH # 435
KEY BISCAVNE, FL 33149

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:
SHARES: 100 @ \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
MIKE MENENDEZ (P/D)
141 CRANDON BLVD. PH # 435
KEY BISCAVNE, FL 33149

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:
MIKE MENENDEZ
141 CRANDON BLVD. PH # 435
KEY BISCAVNE, FL 33149

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
MIKE MENENDEZ (P/D)
141 CRANDON BLVD. PH # 435
KEY BISCAVNE, FL 33149

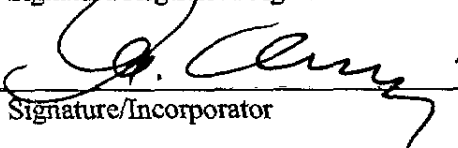
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

08-11-03

Date



Signature/Incorporator

08-11-03

Date

03 AUG 12 PM 12:17

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA