

| (Req                      | uestor's Name)   |             |
|---------------------------|------------------|-------------|
| (Add                      | ress)            |             |
| (Add                      | ress)            |             |
| (City                     | /State/Zip/Phon  | e#)         |
| PICK-UP                   | WAIT             | MAIL        |
| (Bus                      | iness Entity Nar | me)         |
| (Doc                      | ument Number)    |             |
| Certified Copies          | Certificates     | s of Status |
| Special Instructions to F | iling Officer:   |             |
|                           |                  |             |
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Office Use Only



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## TRANSMITTAL LETTER

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

|                        | (1101 0022 0011 0101                         |  | <u> 2 4 9 9 7 7 7 7 7</u> |  |
|------------------------|--|--|---------------------------|--|
| Enclosed is an origina | I and one(1) copy of the article             | es of incorporation and a                          | check for :               |  |
| \$70.00 Filing Fee     | \$78.75 Filing Fee & Certificate of Status   | \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO | & Certificate of Status   |  |
| FROM:                  | ALMETTA<br>Name (Pr                          | t KELLY inted or typed)                            |                           |  |
|                        | 613 S.W 6 37 Address                         |  |                           |  |
|                        | DelRAY BEACH, FL, 33444<br>City, State & Zip |  |                           |  |
|                        | 561-218-0499 Daytime Telephone number        |  |                           |  |

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



November 17, 2003

ALMETTA KELLY 613 SW 6 ST DELRAY BEACH, FL 33444

SUBJECT: ALPHA STAR LEARNING DEVELOPMENT CENTER, INC.

Ref. Number: W03000034178

We have received your document for ALPHA STAR LEARNING DEVELOPMENT CENTER, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved corporation or limited liability company. The name of a voluntarily dissolved Florida corporation or limited liability company is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved entity provides the Department of State with a notarized affidavit, stating they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

The document must state the number of shares of authorized stock.

Please give the incorporator's name and address in article VII. Also have that person sign as incorporator.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2004 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

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) 245-6927.

Tracy Smith
Document Specialist
New Filings Section

Letter Number: 403A00062256

## ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) The name of the corporation shall be: Alpha Star Learning Development Center. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 6/3 5. w 645+ Deleay Beach, FL ARTICLE III PURPOSE The purpose for which the corporation is organized is: Drofit ARTICLE IV SHARES ,one The number of shares of stock is: ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s). Almetta Kelly - President (613 S.w 64 St DelRAy Beach, Free Curtis Kelly - Secretary (613 S.w 64 St DelRay Beach, PC Henry Strapp - Treasurer (8033 Petersons Rd. odessa, FL REGISTERED AGENT The name and Florida street address of the registered agent is: Almetra Kelly 613 S.W 641St DelRay Beach, FL ARTICLE VII INCORPORATOR The name and address of the Incorporator is: 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

<u>7- 17- 03</u> Date

Signature/Registered Agent