

P0400004890/

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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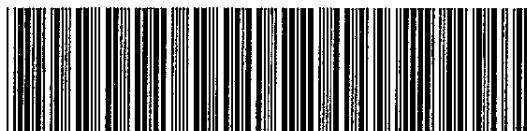
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Northeast Career Institute, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Jennifer Anglin & Louise Aurelien & Ava Thompson

Name (Printed or typed)

P. O. Box 267462

Address

Fort Lauderdale, FL 33326-7462

City, State & Zip

(561) 304 -7200 or (561) 478 - 8935

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 NAME

The name of the corporation shall be: Northeast Career Institute, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: P.O. Box 267462
Fort Lauderdale, FL 33326-7462

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide career education & training.

ARTICLE IV SHARES

The number of shares of stock is: one hundred (100 shares)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Jennifer Anglin, President
Louise Aurélien, Vice President
Ava Thompson, Director

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Louise Aurélien
4095 B Palm Bay Circle
West Palm Beach, FL 33406

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

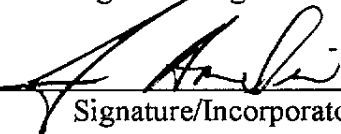
Jennifer Anglin
P.O. Box 267462
Fort Lauderdale, FL 33326-7462

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

3/15/04
Date



Signature/Incorporator

3/15/04
Date