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TRANSMITTAL LETTER

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

F. O. Box 0327 Fallahassee, FL 32	2314			
SUBJECT: Grants	s for Schools, Inc. (PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	_
Enclosed are an ori	ginal and one (1) copy of the art	icles of incorporation and	l a check for:	
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED	
FROM: _	Russell Holloway			, ,
	Namo	e (Printed or typed)		
	P.O. Box 901	Address		*.
	Sebastian, FL 32978	, State & Zip		÷
	(615) 248-4054			. د د
	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:

Grants for Schools, Inc.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: P.O. Box 901
Sebastian, FL 32978

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Service company providing grant assistance.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

R.J. Conforti, 6350 River Run, Sebastian, FL 32978

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Russell Holloway, P.O. Box 901, Sebastian, FL 32978

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

Date

Signature/Incorporator

Date