

P05000145200

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

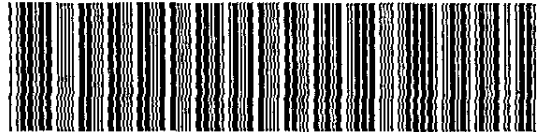
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C210-27

COVER LETTER

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

SUBJECT: Latitudes in Learning, 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: Frank Duffin

Name (Printed or typed)

221 North Julia Circle

Address

St. Pete Beach, FL 33706

City, State & Zip

727-360-4566

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:

Latitudes in Learning, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

221 North Julia Circle St. Pete Beach, FL
33706

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Consulting

ARTICLE IV SHARES

The number of shares of stock is:

8,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

President Frank Duffin 221 North Julia Circle St. Pete Beach, FL 33706
Secretary

Vice President Cheryl Engels 221 North Julia Circle St. Pete Beach, FL 33706
Treasurer

ARTICLE VI REGISTERED AGENT

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

FRANK DUFFIN
221 North Julia Circle St. Pete Beach, FL 33706

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

FRANK DUFFIN 221 North Julia Circle
St. Pete Beach, FL 33706

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 Frank Duffin

Signature Incorporator Frank Duffin

Date

Date

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TALLAHASSEE, FLORIDA