# P06000056988

(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



200069910362

tension (1886) and the second

06 APR 21 PH 12: 59

# **COVER LETTER**

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

SUBJECT: Florida Metropolitan College, Inc.

(PROPOSED CORPORA)	IE NAME – <u>MUSI INCL</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	i a check for:
S70.00 [ ]\$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: David K. Christy		
4901 N.W. 17th Way, 9	(Printed or typed) Suite 102 Address	
Ft Lauderdale, Florida 3	33309 State & Zip	
954-492-9043  Daytime Te	elephone number	<del></del>

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

# 06 APR 21 PH 12: 59

# 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:

Florida Metropolitan College, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4901 N.W.17th Way, Suite 102 Ft Lauderdale, FL 33309

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

College Level Instruction

# ARTICLE IV SHARES

The number of shares of stock is:

300

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

David K. Christy - President 417 North Timber Trail Greenwood, IN 46142

# ARTICLE VI REGISTERED AGENT

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

David K. Christy 4901 N.W. 17th Way, Suite 102 Ft Lauderdale, FL 33309

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

David K. Christy 417 North Timber Trail Greenwood, IN 46142

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