Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0381

Erom:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number: I20000000257 Phone : (850)224-8870 Fax Number : (850)224-7047

FLORIDA PROFIT/NON PROFIT CORPORATION

Aidan Educational Services, Inc.

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ARTICLES OF INCORPORATION

OF

Aidan Educational Services, Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is Aidan Educational Services, Inc.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 7 La Terraza, Lakeland, Florida 33813

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of (\$1.00) per share.

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ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Lana Swartzwelder, 7 La Terraza, Lakeland, Florida 33813

ARTICLE V: OFFICER & DIRECTOR

The name and address of the initial Officer and Director of the corporation is: Lana Swartzwelder, Director, 7 La Terraza, Lakeland, Florida 33813

ARTICLE VI: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Your Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL. 32301.

The undersigned has executed these Articles of Incorporation this 21st day of April 2006.

"Your Capital Connection, Inc. by, Weimar Lopez, Client Representative"

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CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

Inc.	se corporation is: Hidah Educe	timel Ser	
-,1		· 4	
The name and	street address of the registered agent and office is:	ALLA	06/
			FR 2
La	Swaitywelder: 7 fa Jer Keland, FR 33813	0	

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, THEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY, I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Sam Swartgewelden