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COVER LETTER

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

SUBJECT: A+ Education Consulting and Management Inc (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
	(PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u> I	JDE SUFFIX)		
	vander de				
		•			
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:					
□ \$70.00	· ☑ \$78.75	\$78.75	□ \$87.50		
Filing Fee	Filing Fee	Filing Fee	Filing Fee,		
	& Certificate of Status	& Certified Copy	Certified Copy		
			& Certificate of		
			Status		
•		ADDITIONAL COPY REQUIRED			
FROM: Yvonne Silva					
Name (Printed or typed)					
9560 SW 20th Court					
8560 SW 20th Court Address					
Davie, Florida 33324					
City, State & Zip					
(054) 550 0007					
(954) 558-6867 Daytime Telephone number					
v i					

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: A+ Education Consulting and Management Inc.

PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is:

8560 SW 20th Ct. Davie, Fl. 33324

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To educate, train and or manage potential and school owners with compliance issues regarding post secondary education. The corporation may also engage in any activity or business permitted under the laws of the U.S. and of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 500 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Yvonne Silva, MPA President

8560 SW 20th Ct Davie, Florida

Sergio P. Silva - VP

8560 SW 20th Ct

Davie, Fl. 33324

REGISTERED AGENT ARTICLE VI

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Yvonne Silva, MPA 8560 SW 20th Ct Davie, Florida 33324

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Yvonne Silva, MPA 8560 SW 20th Ct Davie, Florida 33324

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

06/10/2006 Signature/Incorporator/Registered Agent Date