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# **COVER LETTER**

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

SUBJECT: <u>Avan</u>	ta Health Career Institute, Inc (PROPOSED CORPORA	C. TE NAME – <u>MUST INCL</u> I	JDE SUFFIX)
	,		
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	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 PY REQUIRED
FROM:	Yvonne Silva		
	Name 8560 SW 20th Court	(Printed or typed) Address	· · · · · · · · · · · · · · · · · · ·
:	Davie, Florida 33324 City,	State & Zip	
	(954) 558-6867	elephone number	

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

# ARTICLES OF INCORPORATION

th compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

# <u>ARTICLE I</u> NAME

The name of the corporation shall be: Avanta Health Career Institute, Inc.

# ARTICLE II PRINCIPAL OFFICE

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 and train students to become professionals and leaders in their field of training.

# ARTICLE IV SHARES

The number of shares of stock is: 500 shares

# **INITIAL OFFICERS AND/OR DIRECTORS** ARTICLE V

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

Yvonne Silva, MPA CEO 8560 SW 20th Ct

Davie, Florida

Amparo N. Sanchez - President 5815 NW 5 Street

Miami, Florida 33126

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

Yvonne Silva	06/10/2006
Signature/Registered Agent	Date
Governe Silva	06/10/2006
Signature/Incorporator	Date