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Division of Corporations	
P. O. Box 6327 ————————————————————————————————————	
SUBJECT: AGAPE SCHOOL OF COPPORATE	ONTINUED EDUCATION, INTENAME- <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the artic	les of incorporation and a check for:
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	S78.75 \$\times \\$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: DRAGAN Name (3621 - 35 = A	TOVANOV Printed or typed) L ST NORTH ddress
ST: PETERS City, S	8426 FLA. 33713 State & Zip

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:
AGAPE SCHOOL OF CONTINUED EDUCATION, INC.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 5876 - 21 ST STREET HORTH # G5 ST. RETERSBURG FLA. 33714 ARTICLE III PURPOSE The purpose for which the corporation is organized is:
FOR PROFIT
ARTICLE IV SHARES The number of shares of stock is: AT \$1.2' PER SHALE TO A TO
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
List name(s), address(es) and specific title(s): DRAGAN JOVANOV (PRESIDENT)
3621- 35th STEFFT HUETH ST. PETERS BURG FLA. 33713
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
The name and address of the Incompositor in
The <u>name and address</u> of the Incorporator is: DRAGAN JOVANOV 3621-35th St. HURTH
ST' PETERS BURG FLA. 33713
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
July - 5 - 200 6
Signature/Registered Agent DRAGAN JOVANOV Date
Signature/Incorporator Date
Signature/Incorporator DRAGAN JOVANOV Date