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COVER LETTER

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

SUBJECT:	Roberta	MShader	Inc.
Enclosed are an orig	(PROPOSED CORPORA		
\$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:	Roberta Name	e (Printed or typed)	eet
<i>,</i> -	Hollywoo	d FL 33, State & Zip	3019

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

Daytime Telephone number

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:

Robertan Shader, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1332 van Buren Street Hollywood, Florida 33019

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

private teaching

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

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FILED VI

ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the re	egistered agent is:
Roberta M. Shader	
1332 Van Buren Street	
ARTICLE VII INCORPORATOR 33019	
ARTICLE VII / INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Roberta M. Shader 1332 Van Buren Street	
1332 Van Buren Street	
**************************************	*********
Having been named as registered agent to accept service of process for the above stated certificate, I am familiar with and accept the appointment as registered agent and agree to	
Roberto M. Shader	10/23/57
Signature/Registered Agent	Date '
Koherto M. Shader	10/23/07
Signature/Incorporator	/ Date/

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SECRETATIF OF STATE
TALLAHASSEE, FLORIDA