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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(a.s.m.,,
(Document Number)
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Certified Copies Certificates of Status
<u>'</u>
Special Instructions to Filing Officer:
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08 JAN 16 PM 2: 05

J. BRYAN

JAN 1 7 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.					
Please return all corresp	ondence concernin	g this matter to:			
AL bent 6	Contact Person)			0	
Inhoustore So	Firm/Company)	Education, I,	<u>_</u>	08 JAN 16	
60 Surfuies	(Address)	te 219		7H 2. 0	
Palm Coas	State and Zip Code)	· 32137		•	
For further information concerning this matter, please call:					
(Name of Contact Person) at (386) 864. 1849 (Area Code and Daytime Telephone Number			364. 1849	_	
(Name of Contact	t Person)	(Area Code and Day	rtime Telephone Number)	-	
Enclosed is a check for t	he following amou	nt:			
\$105.00 Filing Fees an	\$113.75 Filing Fees d Certificate of atus	\$113.75 Filing Fees and Certified Copy	\$122.50 Filing Fees, Certified Copy, and Certificate of Status		
STREET ADDRESS:		MAILING A	DDRESS:		
Registration Section Division of Corporations Clifton Building 2661 Executive Center C		Registration S Division of Co P. O. Box 632 Tallahassee, F	orporations 27		

Certificate of Conversion For

"Other Business Entity"

Into

Florida Profit Corporation

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

Page 1 of 2

(The e	not effective on the date of filing, enter the effective date: 1) cannot be prior to nor monent is filed by the Florida Department of Sive date listed in the attached Articles of Inn.)	ore than 90 days afte State; <u>AND</u> 2) must l	be the same as the		
Signed	this 10 day of JANUARY	, 20	<i>D8</i>		
Signati (Must Office	be signed by a Chairman, Vice Chairman, rs have not been selected, an Incorporator	, Director, Officer, o	r, if Directors or		
Printed	Name: Alberto. SPIKS Title:	Passident a	L CEO_		•
				0 6	SEIAIO SIAIO
)8 JAN 16 F	DRETARY COR
Fees:				PM 2: 06	PORATION
	Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)		₩.*	55

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:

Julouative Solutions For Education, Juc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: Suite 2/4 Palm Corst, FL 32137

ARTICLE III

The purpose for which the corporation is organized is:

To havide Expert management services to all Education clients in the U.S.

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):

Albert G. SPIKS - President & CEO 60 Surfrie Dr Suite 219 Polm Wast, FZ 32137

<u>REGISTERED AGENT</u>

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Albert G. SPINKI 60 Surfrie Dr Suite 219 Polon Coast, FL 32137

ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Albert G. SPINK)	
60 Sundiles A; Jut 2/9	
Albert G. SPIrks 60 Surfiles D., Suite 219 Polm Coast FZ 32137	
****************	***********
Having been named as registered agent to accept service of proces designated in this certificate, I am familiar with and accept the appoin capacity	
Allet B. Sol	1/10/08
Signature/Registered Agent	/ Date
Albert J. K.S	1/10/08
Signature/Incorporator	/ Date