

P08000031970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

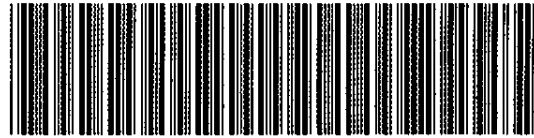
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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3/27

COVER LETTER

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

SUBJECT: Mount Nebo Community Learning Center, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Emanuel Whipple Sr.

Name (Printed or typed)

6075 SW 64th Street

Address

South Miami, FL 33143

City, State & Zip

305-667-3696

Daytime Telephone number

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

Mt. Nebo Community Learning Center

6075 S.W. 64th St.
South Miami, Fla. 33143
Emanuel Whipple/ President

March 10, 2008

Florida Department of State
Amendment Section
Division of Corporations
PO BOX 6327
Tallahassee, FL 32314

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2008 MAR 19 PM 1:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE: Dissolution of Corporation
N03000004627 (Document #)

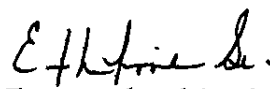
To Whom It May Concern:

Please be advised that the Board of Directors of the Mount Nebo Community Learning Center, Inc. has requested the dissolution of the corporation, whose document number is N034000004627, to be effective as of March 31, 2008.

The board of directors or any of its members will in no way revoke the dissolution and we request that the name be released for immediate use. Should you have any questions or concerns regarding the above, please feel free to contact our Administrative Office, Monday through Friday, from 9:00 AM until 4:00 PM.

Thank you for your prompt attention to this matter.

Sincerely,


Emanuel Whipple Sr.
President

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:

Mount Nebo Community Learning Center, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6075 SW 64th Street
South Miami, FL 33143

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Childcare/Learning Center

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):

Emanuel Whipple Sr.
16209 SW 49th Court
Miramar, FL 33027

Imogene Butler
6333 SW 60th Avenue
South Miami, FL 33143

Katie Koch
13735 C Southwest 84th Street
Miami, FL 33183

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TALLAHASSEE, FLORIDA

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ARTICLE VI REGISTERED AGENT

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

Erica Scrivens
7403 SW 82nd Street
103-N
Miami, FL 33143

ARTICLE VII INCORPORATOR

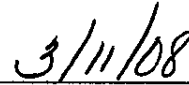
The name and address of the Incorporator is:

Emanuel Whipple Sr.
16209 SW 49th Court
Miramar, FL 33027

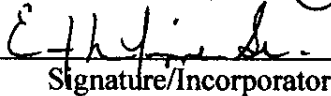
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



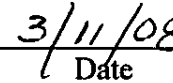
Signature/Registered Agent



Date



Signature/Incorporator



Date

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