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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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SEURETARY OF STATE
TALLAHASSEF, FLORIDA

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COVER LETTER

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

SUBJECT: HCF	INTERNATIONAL LANGUAGE INSTITUTE INC	
	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)	

Enclosed are an orig	ginal and one (1) copy of the a	rticles 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 CO	PY REQUIRED
FROM: <u>F</u>	ATMA KADIROGULLARI Nan	ne (Printed or typed)	
	1831 BUCHANAN ST	Address	
	HOLLYWOOD FLORIDA 33	020 ity, State & Zip	
	954-378-3138 Daytim	e Telephone number	

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

ARTICLES OF INCORPORATION

ILED

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

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ARTICLE I NAME

The name of the corporation shall be:

JALLAHASSEE, FLORIDA

HCF INTERNATIONAL LANGUAGE INSTITUTE INC.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 1831 BUCHANAN ST

HOLLYWOOD FLORIDA 33020

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: STUDENT'S LANGUAGE TRAINING AND SERVICES

ARTICLE IV SHARES

The number of shares of stock is: Twenty Tousand Shares at Five Dollar Each

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): FATMA KADIROGULLARI 1831 BUCHANAN ST HOLLYWOOD FLORIDA 33020

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: FATMA KADIROGULLARI
1831 BUCHANAN ST
HOLLYWOOD FLORIDA 33020

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: FATMA KADIROGULLARI 1831 BUCHANAN ST HOLLYWOOD FLORIDA 33020

Having been named as registered agent to accept service of process for	
certificate, I am familiar with and accept the appointment as registered ago	ont and agree to act in this capacity 09.04.2008
Signature/Registered Agent	Date
If the state of th	09.04.2008
Signature/Incorporator	Date