

PO8 000110052

(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:

Office Use Only



100138715601

12/15/08--01040--020 \*\*122.50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2008 DEC 22 AM 10:20

FILED

T. CLINE

DEC 23 2008

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 17, 2008

MELODY CUTLER  
1135 KILDAIRE FARM RD., SUITE 200-38  
CARY, NC 27511

SUBJECT: THE CENTER FOR GUIDED MONTESSORI STUDIES, INC.  
Ref. Number: W08000055890

We have received your document for THE CENTER FOR GUIDED MONTESSORI STUDIES, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 108A00060726

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2008 DEC 22 AM 10:20

FILED

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Center For Guided Montessori Studies, Inc  
(Name of Resulting Florida Profit Corporation)

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 correspondence concerning this matter to:

Melody Cutler  
(Contact Person)

Number Crunchers, Inc  
(Firm/Company)

1135 Kildaire Farm Rd., Suite 200-38  
(Address)

Cary, NC 27511  
(City, State and Zip Code)

For further information concerning this matter, please call:

Melody Cutler at ( 919 ) 228-2910  
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> \$105.00 Filing Fees | <input type="checkbox"/> \$113.75 Filing Fees<br>and Certificate of<br>Status | <input type="checkbox"/> \$113.75 Filing Fees<br>and Certified Copy | <input checked="" type="checkbox"/> \$122.50 Filing Fees,<br>Certified Copy, and<br>Certificate of Status |
|---|---|---|---|

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2000 DEC 22 AM 10:20

FILED

**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.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

The Center For Guided Montessori Studies, LLC L04-96583  
(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a LLC  
(Enter entity type. Example: limited liability company, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of Florida  
(Enter state, or if a non-U.S. entity, the name of the country)

on 09/30/2006  
(Enter date "Other Business Entity" was first organized, formed or incorporated)

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

N/A

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation:**

The Center For Guided Montessori Studies, Inc  
(Enter Name of Florida Profit Corporation)

5. If not effective on the date of filing, enter the effective date: 01/01/2009  
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; **AND** 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

Signed this 11<sup>th</sup> day of December, 2008.

**Required Signature for Florida Profit Corporation:**

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: same as below

Printed Name: Marc Seldin Title: President

**Required Signature(s) on behalf of Other Business Entity:** [See below for required signature(s).]

Signature: [Signature]

Printed Name: Marc Seldin Title: Manager Member

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**If Florida Limited Liability Company:**

Signature of a Member or Authorized Representative.

**All others:**

Signature of an authorized person.

**Fees:**

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

FILED  
2008 DEC 22 AM 10:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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:

The Center For Guided Montessori Studies, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2400 Miguel Bay Drive  
Terra Ceia, FL 34250

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *Our purpose is to provide traing for teachers using distance methods such as the internet.*

### ARTICLE IV SHARES

The number of shares of stock is:

100,000

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Marc Seldin, President 6821 Cool Pond Rd., Raleigh, NC 27613  
Tim Seldin, *Director* 2400 Miguel Bay Dr., Terra Ceia, FL 34250  
Jonathan Wolff, *Director* 1242 Rue Street Moritz Lake San Marcos, CA 92078  
Kitty Bravo, *Director* 461 NE 791 St., Old Town, FL 32680

### ARTICLE VI REGISTERED AGENT

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

Tim Seldin  
19600 State Road 64 East  
Bradenton, FL 34212

2008 DEC 22 AM 10:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED



**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Marc Seldin  
6821 Cool Pond Rd.  
Raleigh, NC 27613

\*\*\*\*\*

*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  
  
Signature/Incorporator

12/11/08  
Date  
12/11/08  
Date

2008 DEC 22 AM 10:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED