

P090000019965

(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



900143893749

02/19/09--01021--008 **78.75

09 FEB 19 AM 10:37

FILED

RA

TRANSMITTAL LETTER

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

SUBJECT: Exploring Minds Learning Center at Wiles Inc. (DBA Wiles Academy)

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: Ajay Bhasin

12167 NW 9th. Dr.

Coral Springs, FL 33071

(954) 341-9802

The original and one copy of the articles and by laws are enclosed



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 23, 2009

AJAY BHASIN
12167 NW 9TH DR
CORAL SPRINGS, FL 33071

SUBJECT: EXPLORING MINDS LEARNING CENTER AT WILES INC. (DBA
WILES ACADEMY)
Ref. Number: W09000008196

We have received your document for EXPLORING MINDS LEARNING CENTER AT WILES INC. (DBA WILES ACADEMY) and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

Please return the corrected original and one copy of 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) 245-6052.

Paisley A Alford
Clerk
New Filing Section

Letter Number: 809A00006090

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:

Exploring Minds Learning Center at Wiles Inc.

ARTICLE II PRINCIPAL OFFICE

The Street address is 12167 NW 9th Drive, Coral Springs, FL 33071

The mailing address is P.O. Box 9052, Coral Springs, FL 33075

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose is to engage in any activities or business permitted under the laws of the United States and the state of Florida and the period of its duration is perpetual.

ARTICLE IV SHARES

The number of shares of stock is:

The corporation shall have authority to issue 10000 shares, all of one class, \$ 1 par value.

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s), address(es) and titles: The initial officers shall be:

Director: Ajay Bhasin
 12167 NW 9th Drive
 Coral Springs, FL 33071

President: Ajay Bhasin
 12167 NW 9th Drive
 Coral Springs, FL 33071

Treasurer: Ajay Bhasin
 12167 NW 9th Drive
 Coral Springs, FL 33071

Secretary: Ajay Bhasin
 12167 NW 9th Drive
 Coral Springs, FL 33071

09 FEB 19 AM 10:38

Others: As elected or appointed by Board of Directors

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** of the registered agent is:

Ajay Bhasin
12167 NW 9th Drive
Coral Springs, FL 33071

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Ajay Bhasin
12167 NW 9th Drive
Coral Springs, FL 33071


ARTICLE VIII EFFECTIVE DATE

The Effective Date shall be February 14, 2009


ARTICLE IX INDEMNIFICATION

Exploring Minds Learning Center at Wiles Inc. agrees to indemnify and hold harmless it's Directors and Officers from any action they take on behalf of the Corporation.

.....
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

 (Ajay Bhasin)
Signature/Registered Agent

2/27/2009
Date

 (Ajay Bhasin)
Signature/Incorporator

2/27/2009
Date

09 FEB 19 AM 10:38

**Certificate of Designation of
Registered Agent/Registered Office**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **Exploring Minds Learning Center at Wiles Inc.**
2. The name and address of the registered agent and office is:
Ajay Bhasin
12167 NW 9th Drive
Coral Springs, FL 33071

Having been named as registered agent and to accept the services for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Ajay Bhasin (Ajay Bhasin)
(Signature)

2/27/2009
(Date)

09 FEB 19 AM 10:38