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(Req	uestor's Name)	
· (Add	ress)	
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(City/	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	me)
(Doct	ument Number)	
Certified Copies	Certificates	s of Status
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SECRETARY OF STATE

SECRET

3-19-10 CK

COVER LETTER

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

SUBJECT: North O	kaloosa College, Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status PY REQUIRED
FROM:	Thearsa L		
	2891 Apli		
	Crestview	Address v, Florida 32539 State & Zip	
	850 6	603-9265 elephone number	
	E-mail address: (to be used	for future annual report r	otification)

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

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:

North Okaloosa College, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: street Address: 593 James Lee Blvd Crestview, Florida 32539 Mailing address: P.O. Box 1650 Crestview, Florida 32536

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

100% = 100,000 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agentis;

Thearsa L. Collier

2891 Aplin Road

Crestview, Florida 32539

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Thearsa L. Collier

2891 Aplin Road

Crestview, Florida 32539

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

Dota

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