P10000048798

| (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



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05/09/10-01025-001 \$70.00

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ALLER COST, FOR STATE

COVER LETTER

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

| SUBJECT: ProExa | m Inc | | |
|----------------------|----------------------------------|------------------------------|------------------|
| | (PROPOSED CORPORA | TE NAME – <u>MUST INCL</u> | UDE SUFFIX) |
| | | | |
| Enclosed are an orig | inal and one (1) copy of the art | icles of incorporation and | a check for: |
| ☑ \$70.00 | \$78.75 | \$78.75 | \$87.50 |
| • | | | • |
| Filing Fee | Filing Fee | Filing Fee | Filing Fee, |
| | & Certificate of Status | & Certified Copy | Certified Copy |
| | | | & Certificate of |
| | | | Status |
| | | ADDITIONAL COPY REQUIRED | |
| | | 1 | <u>-</u> |
| | | | |
| | | | |
| FROM: Me | olissa Sann | | |
| FROM: W | Name | e (Printed or typed) | |
| | , (4111) | (Trinica or typoa) | |
| 387 | 4 Bay Wind Dr. | | |
| | | Address | |
| | | | |
| Guli | Breeze, FL 32563 | | |
| | | State & Zip | |
| | | | |
| 850 | -221-1753 | | |
| | Daytime T | elephone number | |
| | | | |
| | | | |
| | E-mail address: (to be use | d for future annual report r | notification) |
| | | | |

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: | | |
| ProExam Inc | | |
| 1 to Exam mo | | _ |
| ARTICLE II PRINCIPAL OFFICE | | |
| The principal street address and mailing address, if different is: | | |
| 3874 Bay Wind Dr. | | |
| Gulf Breeze, FL 32563 | | |
| ARTICLE III PURPOSE | | |
| The purpose for which the corporation is organized is: | | |
| Any legal business purpose | _ | |
| | 5 | 200 |
| | 6- MNF | 764 (Page |
| ARTICLE IV SHARES | | |
| The number of shares of stock is: | | |
| 1000 | 垩 | ""一 |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS | PH 12: | |
| List name(s), address(es) and specific title(s): | | |
| President: | | J. |
| Melissa Senn 3874 Bay Wind Dr. | | |
| Gulf Breeze, FL 32563 | | |
| ARTICLE VI REGISTERED AGENT | | |
| The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: | | |
| Melissa Senn | | |
| 3874 Bay Wind Dr. | | |
| Gulf Breeze, FL 32563 | | |
| ARTICLE VII INCORPORATOR | | |
| The name and address of the Incorporator is: | | |
| Melissa Senn | | |
| 3874 Bay Wind Dr. | | |
| Gulf Breeze, FL 32563 | | |
| | ***** | ***** |
| | | |

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

Observed

Date

Observed

Date

Observed

Date