

P/D 0000 56263

(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



700182615717

06/30/10--01009--002 **87.50

FILED

2010 JUL -2 P 1:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL -1 2010
D.A. WHITE

COVER LETTER

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

SUBJECT: Comprehensive Learning Solutions, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: Carmen R. Smiley
Name (Printed or typed)
P.O. Box 981
Address
Silver Springs, FL 34489
City, State & Zip
(352)342-0840
Daytime Telephone number
comprehensivelearningsolutions@gmail.com ✓
E-mail address: (to be used for future annual report notification)

2010 JUL 12 P 1:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

FAX

For: **Dale White**

Fax number: **850-245-6804**

From: **Carmen Smiley**

Fax number:

Date: **July 2, 2010**

Regarding: **Comprehensive Learning Solutions**

Number of pages: **2**

Comments:

I have added Article IX addressing the # stocks/shares

Please let me know if you require any additional
information.

Thanks for your time. ☺carmen



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 1, 2010

CARMEN R. SMILEY
PO BOX 981
SILVER SPRINGS, FL 34489

SUBJECT: COMPREHENSIVE LEARNING SOLUTIONS, INC.
Ref. Number: W10000031512

We have received your document for COMPREHENSIVE LEARNING SOLUTIONS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6933.

Dale White
Regulatory Specialist II
New Filing Section

Letter Number: 110A00016158

ARTICLES OF INCORPORATION

FILED

Comprehensive Learning Solutions, Inc.

2010 JUL -2 P 1:40

ARTICLE I: NAME, PRINCIPAL PLACE OF BUSINESS AND ADDRESS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The name and address of this principal corporation is Comprehensive Learning Solutions, Inc. 315 SE 58th Ave., Ocala, FL. 34471. The mailing address is PO Box 981, Silver Springs, FL 34489. The corporation is organized in compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE II: PURPOSES AND POWERS

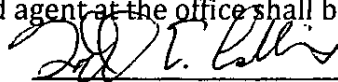
The purpose for which this corporation is organized is to engage in and to transact any lawful business for which a company may be organized under the laws of the State of Florida. The Corporation shall have all powers granted under the laws of the State of Florida.

Article III: DURATION

The duration of this corporation shall be perpetual.

ARTICLE IV: REGISTERED OFFICE AND AGENT

The address of the Registered office is 315 SE 58th Ave, Ocala, FL 34471 the registered agent at the office shall be:



(Signature)

Todd E. Collins

ARTICLE V: ADDITIONAL CAPITAL CONTRIBUTIONS

No contributions of cash or property are required to be made to the Corporation, except as the members may agree upon as provided in the Bylaws to be hereafter adopted by the Board of Directors of the Corporation.

ARTICLE VI: MANAGEMENT

The Board of Directors is established in accordance with Bylaws. The name and address of the persons appointed to act as the initial Directors of this corporation are:

NAME/TITLE
Tamara Brown
Board Member

ADDRESS
511 NW 56th Ave.
Ocala, Florida 34476

Todd Collins
Vice President/Treasurer

10477 NW 7th St.
Pembroke Pines, Florida 33026

Nadine Stokes
Board Member

P.O. Box 314
Reddick, Florida 32686

Carmen Smiley
President/Secretary

P.O. Box 981
Silver Springs, Florida 34489

Stacey Varner
Board Member

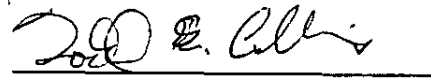
15137 SW 46th Circle
Ocala, Florida 34473

Article VII: OPERATING AGREEMENT

The Directors of the corporation shall hereafter adopt the Bylaws setting forth all the terms, provisions, conditions and covenants by which the Corporation will be governed. The power to adopt, alter, amend or repeal the Bylaws shall be vested in the Member(s) of the board.

Article VIII: Executed on June 24, 2010. The name and address of the incorporator of this corporation shall be:

Todd E. Collins
P.O. Box 981
Silver Springs, FL 34489



ARTICLE IX: SHARES AND STOCKS

The number of shares this corporation is authorized to issue is:
ONE HUNDRED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 JUL -2 P 1:40

FILED