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## **COVER LETTER**

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

SUBJECT: The	University of Southeastern Florida				
	(PROPOSED CORPORA)	ГЕ NAME – <u>MUST INCLU</u>	<u>JDE SUFFIX</u> )		
Enclosed are an	original and one (1) copy of the artic	cles of incorporation and	a check for:		
■ \$70.0 Filing Fe	•	□ \$78.75 Filing Fee & Certified Copy	■ \$87.50 Filing Fee, Certified Copy & Certificate of Status		
	ADDITIONAL CO			PY REQUIRED	
FROM:	Dr. Paul Sergius Koku				
	Name	(Printed or typed)			
	10652 NW 49th St.				
Address					
Coral Springs, FL 33076  City, State & Zip				- Provide	
City, State & Zip				201 171 171 171 171 171 171 171 171 171 1	
	954-752-9878			DIVÎSÎOR DE -7	
Daytime Telephone number			P ====		
	pskoku@bellsouth.net			- 25 ∑iti.	
	E-mail address: (to be used	d for future annual report	notification)	PH 4: 38	

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



### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 31, 2010

DR. PAUL SERGIUS KOKU 10652 NW 49TH STREET CORAL SPRINGS, FL 33076

SUBJECT: THE UNIVERSITY OF SOUTHEASTERN FLORIDA

Ref. Number: W10000041157

RECEIVED

10 SEP -7 AMII: 59

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Please See the annotated Corrections affached.

PSA (03/03/10

We have received your document for THE UNIVERSITY OF SOUTHEASTERN FLORIDA and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 710A00020898

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#### ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

SECRETARY OF STATE DIVISION OF CORPORA 11-W

2010 SEP -7 PM 4: 38

#### ARTICLE I NAME

The name of the corporation shall be:

The University of Southeastern Florida, INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 10652 NW 49th St.

Coral Springs, FL 33076

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Provide on-line tertiary education

#### ARTICLE IV SHARES

The number of shares of stock is: 100

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Professor Jaries Tissa () Ramatunga 2 Campbell Street #EW Visions 2005 Professor Paul Sergius Koku 10852 NW 49th Si Corel Serges, Fr. 13078

Ruth Violet KoKU, MD 10652 NW 49th St Coral Spanne, EL 33076

Esc valastic

Malathi Manik Ratnatunga 2, Campbell Street KEW, Victoria 3101

President and CEO

Vice President, COO and General Counsol

Board Member

Board Member

# ARTICLE VI REGISTERED AGENT

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

Dr. Paul Sergius Koku 10652 NW 49th St. Coral Springs, FL 33076

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Paul Sergius Koku 10652 NW 49th St. Coral Springs, FL 33076

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

08/26/10

Date