

P10000094045

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

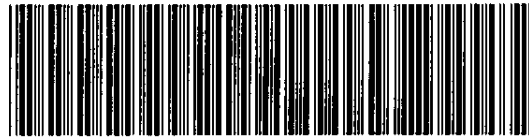
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
10 NOV 15 PM 12:47  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**COVER LETTER**

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

SUBJECT: Power of Knowledge, 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: Vina Austin  
Name (Printed or typed)

8303 Chason Rd. E.  
Address

Jacksonville, FL 32244  
City, State & Zip

(904) 887-9665  
Daytime Telephone number

pac4life@bellsouth.net  
E-mail address: (to be used for future annual report notification)

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

FILED

ARTICLES OF INCORPORATION

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

10 NOV 15 PM 12:47

ARTICLE I NAME

The name of the corporation shall be: Power of Knowledge, Inc.

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address  
8303 Chason Rd. E.  
Jacksonville, FL 32244

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to gain a profit assisting individuals in learning the fundamentals in a specific subject area through various resources.

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jina Austin - President  
Address: 8303 Chason Rd. E.  
Jacksonville, FL 32244

Name and Title: Jina Austin - Treasurer  
Address: 8303 Chason Rd. E.  
Jacksonville, FL 32244

Name and Title: Jina Austin - Secretary  
Address: 8303 Chason Rd. E.  
Jacksonville, FL 32244

ARTICLE VI REGISTERED AGENT

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

Name: Jina Austin  
Address: 8303 Chason Rd. E.  
Jacksonville, FL 32244

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jina Austin  
Address: 8303 Chason Rd. E.  
Jacksonville, FL 32244

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

Jina Austin  
Required Signature/Registered Agent

11/09/10  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Jina Austin  
Required Signature/Incorporator

11/09/10  
Date