

P10000098839

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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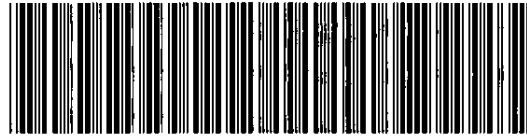
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/07/10--01033--014 **78.75

SEC. CLERK OF COURT
TALLAHASSEE, FLORIDA

2010 DEC -6 AM 11:25

FILED

W10-42246
691



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 8, 2010

CHRISTINE REMY
214 FIRESIDE CT
LEHIGH ACRES, FL 33936

SUBJECT: MEDICAL NURSING LEARNING & TRAINING CENTER INC.
Ref. Number: W10000042246

We have received your document for MEDICAL NURSING LEARNING & TRAINING CENTER INC. 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 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) 245-6929.

Justin M Shivers
Regulatory Specialist II
New Filing Section

Letter Number: 810A00021364

COVER LETTER

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

SUBJECT: Medical Nursing Learning & Training Center Inc.

(PROPOSED CORPORATION NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporations and a check for:

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

FILED
2010 DEC -6 AM 11:25
TALLAHASSEE, FLORIDA

FROM: Christine Vedrine Remy

Name (Printed or typed)

214 Fireside Ct

214 Fireside Ct. Lehigh Acres FL, 33936

Address

Lehigh Acres, FL 33936

Lehigh Acres FL 33936

City, State & Zip

239-867-1184

Daytime Telephone number

Christine.Vedrine@yahoo.com

E-mail address: (to be used for future annual report notification)

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

ARTICLE OF INCORPORATION

ARTICLE I

The name of this Corporation is **Medical Nursing Learning & Training Center Inc.**

ARTICLE II

The principal's address for the Corporation is **214 Fireside Ct., Lehigh Acres, Fl 33936.**
The mailing address for the Corporation is **SAME AS ABOVE.**

ARTICLE III

The purpose of the Corporation is to own business in the Vocational and College Education Field.

ARTICLE IV

The authorized number of shares of stocks of **Medical Nursing Learning & Training Center, Inc.** are **100** and are divided by the following individual/s as follows:

100% Shared **Christine Vedrine Remy**

ARTICLE V

The name/s and address of the office/s is the following:

Officer 1

Christine Vedrine Remy
President
214 Fireside Ct
Lehigh Acres, Fl 33936

ARTICLE VI

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

The name and address of the initial Registration Agent is the following.

Name: Christil Remy **Address:** 482 SW 9th Street Apt 20, Boca Raton, FL 33432

Having been named as registered agent to accept service of process for the above state 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 of Registration Agent:

Christil Remy

ARTICLE VII

The name and address of the incorporators is the following:

Incorporator 1

Christine Vedrine Remy
President
214 Fireside Ct
Lehigh Acres, FL 33936

Christine Vedrine Remy

Signature

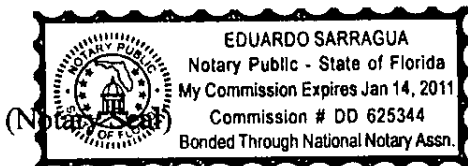
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TALLAHASSEE, FLORIDA

9/2/10
Date

ARTICLE VIII

The Corporation's effective date is the date that was signed and notarized by ^{E.S.} Christine V Remy ~~both~~ corporate originators.

Sworn to on September 2, 2010 by the above ^{E.S.} ~~two~~ incorporators.
(date)



Christine Vedrine Remy
Notary Public Collier County