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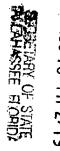
(Requestor's Name)
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PICK-UP WAIT MAIL
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
CK # 1393 for \$ 200 mos
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W1000040751

COVER LETTER

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

SUBJECT: DISCOVERY HOUSE EDUCATIONAL SERVICES INC (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the article	cles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Helen . A. Makinde	(Printed or typed)
3137, McEwan View Circ	Nddress
Orlando City,	State & Zip
407-523-0879 Daytime To	elephone number
dainty47@hotmail.com E-mail address: (to be used	d for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED 11 AUG 15 PH 2: Q3

August 3, 2011

HELEN A. MAKINDE 3137 MCEWAN VIEW CIR ORLANDO, FL 32812

SUBJECT: DISCOVERY HOUSE EDUCATIONAL SERVICES INC.

Ref. Number: W11000040751

We have received your document for DISCOVERY HOUSE EDUCATIONAL SERVICES 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 contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return 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) 245-6995.

Jessica A Fason Regulatory Specialist II

Letter Number: 211A00018311

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

ARTICLE I The name of the cor	NAME poration shall be: DISCOVERY HOUSE E	DUCATIONAL SI	ERVICES INC		
ARTICLE II PRINCIPAL OFFICE Principal street address 3137, McEwan View Circle		Mailing	Mailing address, if different is:		
. ,	rlando, FL 32812				
For Education Books Printing	cich the corporation is organized is: al Support Services, sales and Marketing ational services				
	es of stock is:100 INITIAL OFFICERS AND/OR DIRECTORS	Address:			
Name and 'Tit Address:	le:Charles , A Makinde (Vice President) 3137, McEwan View Circle Orlando, FL 32812	Address:			
Name and Tit Address:	le: Aderinsola Makinde (Director) 20239: Golden Mesa Drive Katy, Texas 77049	Name and Title:	290		
	REGISTERED AGENT ida street address (P.O. Box NOT acceptable) of the Helen Making of the Sign View (; Orlando, FL 32812	<u>.</u>	AUG 15 PM 2:		
	NCORPORATOR ess of the Incorporator is: Helen - A. Makinde 3137, McEwan View Circle Orlando, FL 32812		☆ [™] 18		
	l as registered agent to accept service of process f familiar with and accept the appointment as regist				
	Required Signature/Registered Agent		Date		
	nent and affirm that the facts stated herein are tropartment of State constitutes a third degree felony a				
<u> </u>	Required Signature/Incorporator		07/29/2011		

TO: Florida Department of State (Division of Corporation)

SUBJECT: DISCOVERY HOUSE EDUCATIONAL SERVICES INC

YOUR REF: W11000040751

YOUR LETTER NUMBER: 211A00018311

08/08/2011

STATEMENT OF ACCEPTANCE

This letter certifies that I, Helen A Makinde of 3137, McEwan View Circle, Orlando, FL 32812 am the registered Agent for the above stated corporation. I do state here that I am familiar with and accept the appointment (i.e the duties and responsibilities) of a registered agent and agree to act in this capacity.

Helen .A. Makinde

11 AUG 15 PM 2: 19