

PI2000057173

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

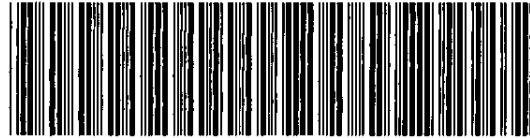
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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06/25/12--01033--022 **70.00

SECRET
DIVISION OF REVENUE
12 JUN 25 PM 3:19

6/26

JB

COVER LETTER

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

SUBJECT: Productive Classrooms, 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: Sharon Feinblatt
Name (Printed or typed)

12160 NW 53 Street
Address

CORAL Springs, FL 33076
City, State & Zip

954-803-0782
Daytime Telephone number

Sharon.Feinblatt@yahoo.com
E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Productive Classrooms, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

12160 NW 53 Street
CORAL Springs, FL.
33076

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Educational Consulting

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SHARON Feinblatt, President

Address: 12160 NW 53 St
CORAL Springs FL
33076

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

ARTICLE VI REGISTERED AGENT

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

Name: SHARON Feinblatt

Address: 12160 NW 53 St
CORAL Springs FL 33076

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SHARON Feinblatt

Address: 12160 NW 53 St
CORAL Springs, FL 33076

12 JUN 25 PM 3:19

FILED
CLERK OF THE COURT
JUN 25 2012
CORAL SPRINGS, FL

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

Sharon Feinblatt

Required Signature/Registered Agent

6/18/12

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.

Sharon Feinblatt

Required Signature/Incorporator

6/18/12

Date