

P12000075153

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

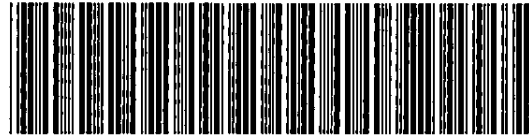
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/31/12--01005--008 **87.50

MRS
9/4/12

FILED
12 AUG 31 PM 1:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Crown Education Services, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Valda J. Adeyiga

Name (Printed or typed)

8579 SW 23rd Court

Address

Miramar, FL 33025

City, State & Zip

(954)433-5039

Daytime Telephone number

vjadeyiga@juno.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)

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12 AUG 31 PM 1:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME Crown Education Services, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
10031 Pines Blvd, Suite 246
Pembroke Pines, FL 33024

Mailing address, if different is:
8579 SW 23rd Court
Miramar, FL 33025

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide educational and developmental services/activities to individual, as well as group of students. Also to participate in any and other lawful businesses.

ARTICLE IV SHARES

The number of shares of stock is: 10,000 shares @ \$0.10 per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Valda J. Adeyiga, President
Address: 8579 SW 23rd Court
Miramar, FL 33025

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: SBIR Corp
Address: 10031 Pines Blvd, Suite 246
Pembroke Pines, FL 33024

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Valda J. Adeyiga
Address: 8579 SW 23rd Court
Miramar, FL 33025

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

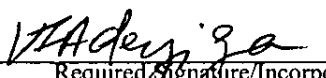


Required Signature/Registered Agent

08/28/2012

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.



Required Signature/Incorporator

08/28/2012

Date