

P13000031294

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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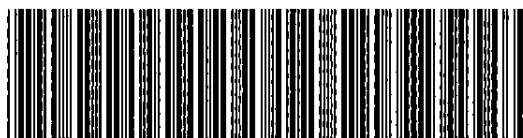
(Business Entity Name)

(Document Number)

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

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13 APR -5 PM 2:51  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

4/5/13

## COVER LETTER

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

SUBJECT: CONSTRUCTING HIGHER LEARNING 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: Tony Jean  
Name (Printed or typed)

907 NE 1st Street  
Address

Pompano Beach FL 33060  
City, State & Zip

786-762-5243  
Daytime Telephone number

Tony8.Jean@yahoo.com  
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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: CONSTRUCTING HIGHER LEARNING INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

907 NE 1st Street  
POMPANO BEACH, FL 33060

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and ALL lawful  
BUSINESS.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Tony Jean President Name and Title: \_\_\_\_\_

Address 907 NE 1st Street Address: \_\_\_\_\_

POMPANO BEACH,  
FL 33060

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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TALLAHASSEE FLORIDA

(cont.)

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Name and Title: \_\_\_\_\_ Name and Title: 13 APR -5 PM 2:51  
Address: \_\_\_\_\_ Address: SECRETARY OF STATE  
\_\_\_\_\_  
\_\_\_\_\_ TALLAHASSEE FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

Name: Tony Jean  
Address: 907 NE 1st Street  
Panama Beach FL 33060

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Tony Jean  
Address: 907 NE 1st Street  
Panama Beach FL 33060

*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*

[Signature] Required Signature/Registered Agent 4/5/2013 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.*

[Signature] Required Signature/Incorporator 4/5/2013 Date