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(Requestor's Name)

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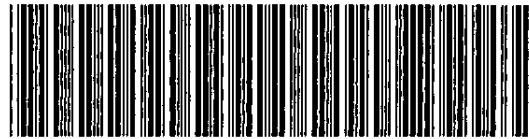
(Business Entity Name)

(Document Number)

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13 AUG 14 PM 4:46  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

T. Burch AUG 14 2013

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## COVER LETTER

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

SUBJECT: **AMANDS ENTERPRISES, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

FROM: **Mary Tebes, Ph.D.**

Name (Printed or typed)

**2686 N.W. 41st Street**

Address

**Boca Raton, FL 33434**

City, State & Zip

**561 994-0466**

Daytime Telephone number

**mltebes@aol.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: AMANDS ENTERPRISES, INC.

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

2686 N.W. 41ST Street

Boca Raton, FL 33434

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: To provide consultation services in the field of education.

The focus is on using technology in educational endeavors in grades K-12 and Higher Education.

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**ARTICLE IV    SHARES**

The number of shares of stock is: 100

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

Name and Title: Mary Tebes, Ph.D. - President

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

Address: 2686 N.W. 41st Street

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

Boca Raton, FL 33434

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

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

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

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

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

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

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

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

(conti.)

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

**ARTICLE VI REGISTERED AGENT**

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

Name: Mary Tebes, Ph.D.  
Address: 2686 N.W. 41 st Street  
Boca Raton, FL 33434

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**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Mary Tebes, Ph.D.  
Address: 2686 N.W. 41st Street  
Boca Raton, FL 33434

*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*

Mary Tebes Ph.D.  
Required Signature/Registered Agent

08/09/2013

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.*

Mary Tebes Ph.D.  
Required Signature/Incorporator

08/09/2013

Date