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Email Address: john@pineapplecoveacademy.com

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

FLORIDA PROFIT/NON PROFIT CORPORATION

Pineapple Cove Academy North Shore Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Pineapple Cove Academy North Shore Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

**Pineapple Cove Academy North Shore Inc.
1785 S. Eldron Boulevard
Palm Bay, FL 32909**

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ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**John Moran
1517 S. Miramar Avenue
Indialantic, FL 32903**

**Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940**

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ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

John Moran - 1517 S. Miramar Avenue, Indialantic, FL 32903 - President/Director

Thomas Moran - 1517 S. Miramar Avenue, Indialantic, FL 32903 - Vice President/Director

Beth Moran - 1517 S. Miramar Avenue, Indialantic, FL 32903 - Secretary/Director

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

John Moran - 1517 S. Miramar Avenue, Indialantic, FL 32903

Thomas Moran - 1517 S. Miramar Avenue, Indialantic, FL 32903


Beth Moran - 1517 S. Miramar Avenue, Indialantic, FL 32903

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

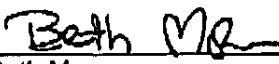
10th day of December 20 13



John Moran Signature



Thomas Moran Signature



Beth Moran Signature

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**


PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE ST ATE OF
FLORIDA. SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE
REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Pineapple Cove Academy North Shore Inc.

2. The name and address of the registered agent and office is:

John Moran
Name
1517 S. Miramar Avenue
(P.O. Box or Mail Drop Box NOT Acceptable)
Indialantic, FL 32903
(City / State / Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.


John Moran
SIGNATURE

12/10/2013
(Date)

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