

PI3000100901

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

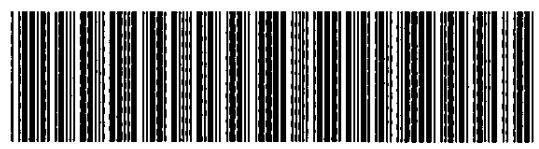
(Business Entity Name)

(Document Number)

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

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13 DEC 19 PM 12:32  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

YMD 12/20

**COVER LETTER**

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

SUBJECT: Be Unique Academy 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
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Johana Sarmiento  
Name (Printed or typed)

11155 SW 112 Avenue  
Address

Miami, FL 33176  
City, State & Zip

305. 271. 9000  
Daytime Telephone number

FCardenas@bcuacademy.net  
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: Be Unique Academy, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

11155 SW 112 AVENUE  
MIAMI, FL. 33176

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Be Unique Academy  
will provide educational services to children  
and young adults with developmental  
disabilities through a multi sensory  
approach.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

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

Name and Title: Johana Sarmiento  
President  
Address: 15612 SW 51 Terr.  
Miami, FL. 33185

Name and Title: Felix Corderos  
vice President  
Address: 15612 SW 51 Terr.  
Miami, FL. 33185

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

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

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

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

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

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

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

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

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: Johana Sarmiento  
 Address: 15612 SW 51 Terr.  
Miami, FL. 33185

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 ALLAHSEE, FLORIDA  
 DEPARTMENT OF STATE

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Felix Cardenas  
 Address: 15612 SW 51 Terr.  
Miami, FL. 33185

*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*

J Sarmiento  
 Required Signature/Registered Agent

12.12.2013  
 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

12.12.2013  
 Date