P/4000 3/863

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL.			
(Business Entity Name)					
(D ₉	(Document Number)				
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					
·					

Office Use Only



600258366636

04/07/14--01046--008 **78.75

14 APR -7 PH 12: 51

a and

COVER LETTER

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

SUBJECT: TOPLER GLOBAL EDUCATION CORP

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

inal and one (1) copy of the ar	ticles of incorporation and	l a check for:
\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	\$78.75 Filing Fee	Filing Fee Filing Fee

YANZHOU XU
Name (Printed or typed)
1150 HOMEWOOD BLVD APT E102
Address
DELRAY BEACH, FL, 33445
City, State & Zip
(561)5065065
Daytime Telephone number
aimmilly@hotmail.com

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION 14 APRIL - 7
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

UNISION OF SURPORATIONS

	in compliance with enapter 607 and	14 12:51
ARTICLE I NAM The name of the corporat	TOPLER GLOE	BAL EDUCATION CORP
	NCIPAL OFFICE Principal street address OOD BLVD APT E102	Mailing address, if different is:
DELRAY BEAC	CH, FL, 33445	
ARTICLE III PUR The purpose for which the	POSE the corporation is organized is: to pro	vide the consulting service of
international ex	change and collaboration of	education, culture, and arts.
,		
	· · · · · · · · · · · · · · · · · · ·	
APTICLE IV SHA	PFS 4000	
ARTICLE IV SHA The number of shares of	stock is:	
ARTICLE V INIT	TIAL OFFICERS AND/OR DIRECTOR	<u>ıs</u>
Name and Title	YANZHOU XU, President	Name and Title:
Address	1150 HOMEWOOD BLVD APT E102	Address:
	DELRAY BEACH, FL, 33445	
Nama and Title		Name and Title:
Address		
Addiess		Audress.
Name and Title:		Name and Title:
Address		Address:

Name and	l Title:	Name and Title:
Address		Address:
ARTICLE VI The name and Flo Name: Address:	REGISTERED AGENT orlda street address (P.O. Box NOT acceptable) o EDWARD KAHLA 6710 NW 89TH AVE	f the registered agent is: -
ARTICLE VII	TAMARAC, FL, 33321 INCORPORATOR	-
, 	dress of the Incorporator is: EDWARD KAHLA	
Name: Address:	6710 NW 89TH AVE TAMARAC, FL, 33321	- -
this certificate, I a	ned as registered agent to accept service of process um familiar with and accept the appointment as reg Required Signature/Registered Agent	true. I am aware that the false information submitted in a sy as provided for in s.817.155, F.S.
	Required Signature/Incorporator	4/1/2014 Date