

P14000055073

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

06/23/14--01057--007 4478.75

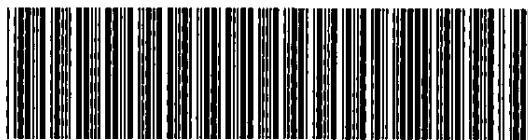
(Business Entity Name) _____

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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100-10

A simple line drawing consisting of a large, rounded, oval-like shape. A small, separate loop is attached to the top right of the main shape. A small, separate oval is attached to the bottom left of the main shape.

COVER LETTER

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

SUBJECT: Primary Educational Concepts, 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 & Certificate of
 Status Status

ADDITIONAL COPY REQUIRED

FROM: Chandrouti Haniff
Name (Printed or typed)

4251 NW 5th Street, #253

Address

Plantation, FL 33317

City, State & Zip

(954) 889-4031

Daytime Telephone number

msdj_19@yahoo.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:

Primary Educational Concepts, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

4251 NW 5th Street, #253

1/23 5410:10
Mailing address, if different is:

SAME

Plantation, FL 33317

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide youth and their families with innovative and creative educational opportunities and experiences to build foundations for success in life.

ARTICLE IV SHARES **100**

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Chandrouti Haniff, President**

Name and Title: **Thelma Lockhart, VP**

Address: **4251 NW 5th Street, #253**

Address: **8463 N. Lake Forest Drive**

Plantation, FL 33317

Davie, FL 33328

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: Chandrouti Haniff
Address: 4251 NW 5th Street, #253
Plantation, FL 33317

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Chandrouti Haniff
Address: 4251 NW 5th Street, #253
Plantation, FL 33317

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

Chandrouti Haniff
Required Signature/Registered Agent

6/13/2014
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.

Chandrouti Haniff
Required Signature/Incorporator

6/13/2014
Date

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