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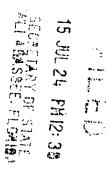
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COVER LETTER

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

SUBJECT:	Annstian Academy Port St. Lucie, Inc		UNE CUERIVY
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00 Filing Fee	• •	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status
•		ADDITIONAL CO	PY REQUIRED
FROM:	ynthia J Netwig Nam	e (Printed or typed)	
590	0 NW Peacock Blvd Suite 4		
		Address	
Ро	rt Saint Lucie, FL 34986		
	City	, State & Zip	
77:	2-905-8096		
	Daytime	l'elephone number	
cin	dynetwig@att.net		
	E-mail address: (to be use	ed 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)

The name of the corpo ARTICLE II PRIM 590 NW Pcacock Blv	VCIPAL OFFICE Principal street address	١	Mailing address, if different is:		
Port Saint Lucie, FL					
This corporation is es	POSE 1 the corporation is organized is: 1 tablished for the purpose of being a licens 1 ty to ensure that it will provide a center of				
			15 JUL 24 PH 12:		
		nare	Daucia M Dillon, Secretary		
	590 NW Peacock Blvd	Address:	590 NW Peacock Blvd		
	Suite 4 Port Saint Lucie, FL 34986	_	Suite 4 Port Saint Lucie, FL 34986		
Name and Ti Address	Name and Title: Peter A Telex Jr, Vice President Name and Title: 590 NW Peacock Blvd 590 NW Peacock Blvd		Joy Knapp, Director 590 NW Peacock Blvd		
	Port Saint Lucie, FL 34986		Port Saint Lucic, FL 34986		
Name and Title:	Petra Cintron, Treasurer 590 NW Peacock Blvd	Name and Title Address:	:		
	Suite 4 Port Saint Lucie, FL 34986				

Name and	Title:	Name and Title:			
Address		Address:			
	EGISTERED AGENT				
The <u>name and Flo</u>	rida street address (P.O. Box NOT acceptable Green and Gentry CPAs LLC	le) of the registered agent is:			
Name:		_ _			
Address:	745 SE Port Saint Lucie Blvd	_			
	Port Saint Lucie, FL 34984				
	V.CORDOD (TOD	•			
	<u>NCORPORATOR</u>				
The name and add	dress of the Incorporator is:		ें हैं ज		
Name:	Cynthia J Netwig		in the En		
Address:	590 NW Peacock Blvd, Suite 4		2		
	Port Saint Lucie, FL 34986				
ARTICLE VIII	EFFECTIVE DATE:	(OPMICALLE)	(A)		
Effective date, if of	other than the date of filing:ate is listed, the date must be specific and ca	(OPTIONAL)	avs prior or 90 business		
days after the fili			.,, p		
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.					
	ed as registered agent to accept service of pro in familiar with and accept the appointment of				
Shum	1 mack		1/20/2015		
	Required Signature/Registered Agent		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.					
\mathcal{A}	1 1		1/20/15		
Requir	ed Signature/Incorporator/		Date		
v	U				



590 NW Peacock Blvd. Suite #4 Port Saint Lucie, Florida 34986

Phone: 772-905-8096 Fax: 772-879-6975 www.gcapsl.org

July 20, 2015

To Whom It May Concern:

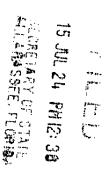
Please be advised that Grace Christian Academy Port St. Lucie, Inc. Document Number N15000001268; has been dissolved effective July 17, 2015. The not-for-profit was opened in error and should have been a For Profit Corporation. I have no intention of revoking this dissolution.

Sincerely,

Cynthia Netwig

Cynthia & etu

Administrator



PIS000063755