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(Requestor's Name)

(Address)

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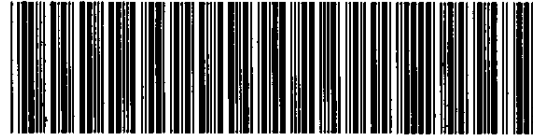
(Business Entity Name)

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TALLAHASSEE FLORIDA

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COVER LETTER

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

SUBJECT: TLS NATIONAL EDUCATION SERVICES, 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
 Status
ADDITIONAL COPY REQUIRED

GEORGE BAIR

FROM: _____

Name (Printed or typed)

1340 Lavin Lane

Address _____

Ft Myers, FL 33917

City, State & Zip

(239) 777-1893

Daytime Telephone number

tlsnationaleducationservices@gmail.com

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
For
TLS NATIONAL EDUCATION SERVICES, INC.

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TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

TLS NATIONAL EDUCATION SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address is:

**1340 Lavin Lane
Ft Myers, FL 33917**

The mailing address is:

**1340 Lavin Lane
Ft Myers, FL 33917**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

**GEORGE BAIR, PRESIDENT
1340 Lavin Lane
Ft Myers, FL 33917**

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the Registered agent is:

**GEORGE BAIR
1340 Lavin Lane
Ft Myers, FL 33917**

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TALLAHASSEE FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**GEORGE BAIR
1340 Lavin Lane
Ft Myers, FL 33917**

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

George Bair
Required Signature / Registered Agent

05/27/16
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.

George Bair
Required Signature / Incorporator

05/27/16
Date