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DIVISION OF CORPORATIONS
16 AUG 22 AM 11:29

08/29/16

COVER LETTER

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

SUBJECT: A+ Plus Christian 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

☒ \$78.75 Filing Fee
& Certified Copy

☒ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: A+ Plus Christian Academy Inc.

Name (Printed or typed)

264 Division Ave

Address

Ormond Beach FL 32174

City, State & Zip

754-245-7768

Daytime Telephone number

judithperry77@gmail.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: A+ Plus Christian Academy Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

264 Division Ave

161 SW Palm Dr # 201

Ormond Beach FL 32174

Port St Lucie, FL 34986

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Preschool/daycare

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Marie J Perry

Name and Title: _____

Address

161 Sw Palm Dr # 201

Address: _____

Port St Lucie, FL 34986

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

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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: Marie J Perry
Address: 161 Sw Palm Dr # 201
Port St Lucie, Fl 34986

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Marie J Perry
Address: 161 Sw Palm Dr # 201
Port St Lucie, Fl 34986

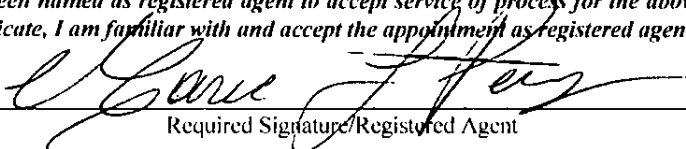
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

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.

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



Required Signature/Registered Agent

8/12/2016

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.



Required Signature/Incorporator

8/12/2016

Date

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