

P17000045311

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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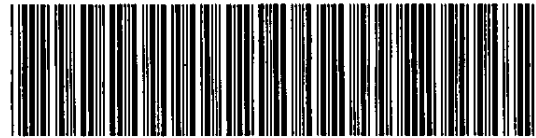
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/22/17--01031--006 **78.75

FILED
17 MAY 22 AM 11:10
SECRETARY OF STATE
TALLAHASSEE FLORIDA

✓ 05/23/17

COVER LETTER

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

SUBJECT: Genesis Educational Services of Florida, 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: Cesar Sastre

Name (Printed or typed)

6951 Sunrise Boulevard

Address

Plantation, FL 33313

City, State & Zip

302-740-6442

Daytime Telephone number

csastre@bassuw.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: Genesis Educational Services of Florida, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5000 Coconut Creek Parkway, Suite C

6951 Sunrise Boulevard

Margate, FL 33063

Plantation, FL 33313

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: providing innovative career education programs, vocational training skills, and career development services for tomorrow's marketplace and workforce. Genesis Educational Services of Florida, Inc.
empowers, encourages, and prepares its diverse student body to pursue their career, educational, and vocational goals. We
will forge quality partnerships with prospective employers; local, state, and federal government agencies; and non-profit
organizations in our community for the greater benefit of our students, staff, instructors, and alumni. We will operate
an efficient and responsive student-centered learning environment with fairness, integrity, and respect to promote best
business practices and to ensure full compliance with accrediting standards and regulatory bodies.

ARTICLE IV SHARES

The number of shares of stock is: 10,000 common stock at \$ 1.00 per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Edward P. Jackson, CEO

Name and Title: Krishna George, President

Address 6951 W Sunrise Boulevard

Address: 182 NW 75th Terrace

Plantation, FL 33313

Plantation, FL 33317

Name and Title: James T. Garrett, Controller

Name and Title: Richard Hermanns

Address 6951 W Sunrise Boulevard

Address: 3633 Bayshore Boulevard NE

Plantation, FL 33313

St. Petersburg, FL 33703

Name and Title: Cesar Sastre, General Counsel

Name and Title: _____

Address 6951 W. Sunrise Boulevard

Address: _____

Sunrise, FL 33313

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: Jennifer Sanes _____

Address: 6951 W. Sunrise Boulevard _____

Plantation, FL 33313 _____

ARTICLE VII INCORPORATOR

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

Name: James T. Garrett _____

Address: 6951 W Sunrise Boulevard _____

Plantation, FL 33313 _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

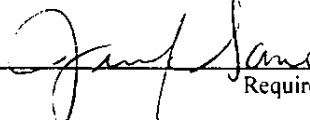
ARTICLE VIII EFFECTIVE DATE:

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 days prior or 90 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

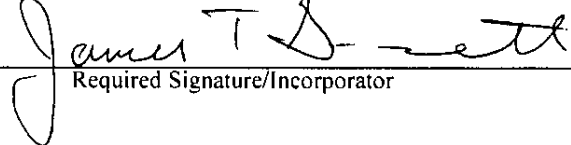


Required Signature/Registered Agent

5/9/17

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

5/9/2017

Date