

9/9/22, 8:51 AM

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Division of Corporations
 Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

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To:

Division of Corporations
 Fax Number : (850)617-6381

From:

Account Name : ALLSTATE CORPORATE SERVICES CORP
 Account Number : I20040000031
 Phone : (800)906-9220
 Fax Number : (800)906-9880

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION**New Lake High School Inc**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

2022 SEP -9 PM 2:26

2022 SEP -9 AM 1:43

De

ARTICLES OF INCORPORATION

((H22000311431 3)))

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: New Lake High School Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

200 South Andrews Avenue, Suite 504

Fort Lauderdale, FL 33301

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The corporation will operate a virtual high school & any lawful purpose

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ramón Villa Menéndez, President

Name and Title: _____

Address: Calle Uria 3 - Entresuelo 1 - 33003

Address: _____

Oviedo - Asturias Spain

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

SEP 11 11:43 AM '22

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: Offix Solutions LLC
 Address: 200 South Andrews Ave, Suite 504
Fort Lauderdale, FL 33301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ramón Villa Menéndez
 Address: 200 South Andrews Ave, Suite 504
Fort Lauderdale, FL 33301

SEP 11 11:14 6-025 863

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

<u>Ramón Villa Menéndez</u>	<u>08/04/2022</u>
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.

<u>Ramón Villa Menéndez</u>	<u>08/04/2022</u>
Required Signature/Incorporator	Date