

To:

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5/23/23, 12:25 PM

P23000040701

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

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FLORIDA PROFIT/NON PROFIT CORPORATION
MY 2ND HOME LEARNING CENTER CORP

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

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TALLAHASSEE, FL

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ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: MY 2ND HOME LEARNING CENTER CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

19133 ACORN RD FORT MYERS FL 33967**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: HECTOR L. MARTINEZ (P)

Name and Title: _____

Address 19133 ACORN RD

Address: _____

FORT MYERS, FL 33967Name and Title: YANEISY GUEREN (S)

Name and Title: _____

Address 19133 ACORN RD

Address: _____

FORT MYERS, FL 33967

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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To:

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2023-05-23 16:37:04 GMT

13053284774

From: Yanet Avila

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: YANEISY GUEREN
Address: 19133 ACORN RD
FORT MYERS, FL 33967

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: YANEISY GUEREN
Address: 19133 ACORN RD
FORT MYERS, FL 33967

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

5/23/23
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

Date

5/23/23

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