## P 240000 35474

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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## **COVER LETTER**

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

SUBJECT: EDU-T	ECH AI CONSULTING, INC.		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original	inal and one (1) copy of the art	ticles of incorporation and	d a check for:
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	
		ADDITIONAL CO	
FROM: YA	NDIRA PILAT	e (Printed or typed)	
320	03 JOSIE ST		
<del></del>		Address	
PA	NAMA CITY, FL 32404 City	, State & Zip	
850	0-775-5012 Daytime 1	Felephone number	
SU:	SANH2008@GMAIL.COM		
<del></del>	E-mail address: (to be use	d for future annual report r	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)

RIJCI.P. (I PKIA	<u>'CIPAL OFFICE</u>		
MICELII IMI	Principal street address	Mailing address, if different	ent is:
203 JOSIË ST			
ANAMA CITY, FL 32	2404		
RTICLE III PURI he purpose for which	POSE the corporation is organized is: ANY A	ND ALL LAWFUL BUSINESS.	· · · · · · · · · · · · · · · · · · ·
			<del> </del>
<u></u>			
		<del></del>	
	RES 100,000	<del></del>	
RTICLE V INITI	IAL OFFICERS AND/OR DIRECTORS	Noncologia PRESIDENT	
RTICLE V INIT	IAL OFFICERS AND/OR DIRECTORS Ide: YADIRA PILAT	Name and Title: PRESIDENT	
RTICLE V INITI	IAL OFFICERS AND/OR DIRECTORS Ide: YADIRA PILAT	Name and Title: PRESIDENT  Address:	
RTICLE V INIT	MAL OFFICERS AND/OR DIRECTORS  Ale: YADIRA PILAT  3203 JOSIE ST		
Name and Tit Address	MAL OFFICERS AND/OR DIRECTORS  The: YADIRA PILAT  3203 JOSIE ST  PANAMA CITY, FL 32404		
Name and Tit Address	MAL OFFICERS AND/OR DIRECTORS  Be: YADIRA PILAT  3203 JOSIE ST  PANAMA CITY, FL 32404  e:	Address:  Name and Title:	
Name and Tit  Address  Name and Titl	MAL OFFICERS AND/OR DIRECTORS  The: YADIRA PILAT  3203 JOSIE ST  PANAMA CITY, FL 32404	Address:  Name and Title:	
Name and Tit  Address  Name and Titl	MAL OFFICERS AND/OR DIRECTORS  Be: YADIRA PILAT  3203 JOSIE ST  PANAMA CITY, FL 32404  e:	Address:  Name and Title:	
Name and Tit Address Name and Titl Address	MAL OFFICERS AND/OR DIRECTORS  Ble: YADIRA PILAT  3203 JOSIE ST  PANAMA CITY, FL 32404  e:	Address:  Name and Title:	
Name and Tit Address Name and Titl Address	MAL OFFICERS AND/OR DIRECTORS  Ble: YADIRA PILAT  3203 JOSIE ST  PANAMA CITY, FL 32404  e:	Address:  Name and Title:  Address:  Name and Title:	
Name and Titl Address  Name and Titl Address	e:e:  AL OFFICERS AND/OR DIRECTORS  Ale: YADIRA PILAT  3203 JOSIE ST  PANAMA CITY, FL 32404	Address:  Name and Title:  Address:  Name and Title:	

Name and	d Title:	Name and Title:
Address		Address:
	REGISTERED AGENT	
	orida street address (P.O. Box NOT acceptable) o YADIRA PILAT	of the registered agent is:
Name:		_
Address:	3203 JOSIE ST	_
	PANAMA CITY, FL 32404	<del>_</del>
ARTICLE VII	<u>INCORPORATOR</u>	
The name and ac	Idress of the Incorporator is:	
Name:	YADIRA PILAT	_
Address:	3203 JOSIE ST	
	PANAMA CITY, FL 32404	<del>-</del>
Effective date, if		. (OPTIONAL) not be more than five days prior or 90 days after the
	inserted in this block does not meet the applicable ffective date on the Department of State's records	le statutory filing requirements, this date will not be listed as s.
	amiliar with and accept the appointment as registe	for the above stated corporation at the place designated in this ered agent and agree to act in this capacity
	Gadina Pilat	5/28/24
	Required Signature/Registered Agent	Date
	Danautmant of State constitutor a third doorge falor	te true. I am aware that the false information submitted in a ony as provided for in s.817.155, F.S.
	re/Incorporator	5/28/24
Required Signatu	re/Incorporato/	Date