

RECEIVED

## COVER LETTER

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

SUBJECT: LLD Scholars 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

2025 JUN 15 AM 9:47

FILED

FROM: Laura L. Dorsey  
Name (Printed or typed)  
4904 N 32nd Street  
Address  
Tampa Florida 33610  
City, State & Zip  
813.438.0020  
Daytime Telephone number  
aahewitt71@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: LLD Scholars Inc

### ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4904 N 32nd Street Tampa Florida 33610

### ARTICLE III PURPOSE

The purpose for which the corporation is organized for all legal business activities

### ARTICLE IV SHARES

The number of shares of stock is: 100

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dr. Laura Dorsey, President/CEO Name and Title:

Address 4904 N 32nd Street Address:   
Tampa Florida 33610

Name and Title:  Name and Title:

Address  Address:

Name and Title:  Name and Title:

Address  Address:

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2025 JUN 15 AM 9:47  
CLERK OF DISTRICT COURT  
JULIA S. BROWN

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: Alison A. Hewitt

Address: 4904 N 32nd Street Tampa Florida 33610

\_\_\_\_\_

**ARTICLE VII INCORPORATOR**

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

Name: Alison A. Hewitt

Address: 4904 N 32nd Street Tampa Florida 33610

\_\_\_\_\_

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 1-11-2025. (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*

Alison A. Hewitt 1-14-2025  
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.*

Alison A. Hewitt 1-14-2505  
Required Signature/Incorporator Date

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2025 JAN 15 AM 9:47  
TAMPA FLORIDA