

P97000022661

*Sharon A. Troy*

Requestor's Name

*2335 N.W. 107<sup>th</sup>*

Address

*Miami Fla. (305) 687-2344*

City/State/Zip

Phone #

00000021 12200 --E

03/13/97- 01017-000

\*\*\*122.50 \*\*\*122.50

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. *The Advance Learning Center*  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☒ Will wait

☐ Photocopy

☐ Certificate of Status

| NEW FILINGS              |                   | AMENDMENTS               |  |
|--------------------------|-------------------|--------------------------|--|
| <input type="checkbox"/> | Profit            | <input type="checkbox"/> | Amendment                              |
| <input type="checkbox"/> | NonProfit         | <input type="checkbox"/> | Resignation of R.A., Officer/ Director |
| <input type="checkbox"/> | Limited Liability | <input type="checkbox"/> | Change of Registered Agent             |
| <input type="checkbox"/> | Domestication     | <input type="checkbox"/> | Dissolution/Withdrawal                 |
| <input type="checkbox"/> | Other             | <input type="checkbox"/> | Merger                                 |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
| <input type="checkbox"/>       | Foreign             |
| <input type="checkbox"/>       | Limited Partnership |
| <input type="checkbox"/>       | Reinstatement       |
| <input type="checkbox"/>       | Trademark           |
| <input type="checkbox"/>       | Other               |

10:00 AM MAR 13 1997

Examiner's Initials

SECRET  
DIVISION  
97 MAR 13 11 08 31

**ARTICLES OF INCORPORATION**  
**OF**  
**THE ADVANCE LEARNING CENTER, INC.**

The undersigned, acting as incorporator of a corporation under the Florida Statutes, adopts the following Articles of Incorporation:

FIRST: The name of the corporation is The Advance Learning Center, Inc.

SECOND: The period of duration is perpetual.

THIRD: The corporation is organized for the purpose of transacting any and all lawful business for which corporations may be incorporated under the Florida Statutes.

FOURTH: The aggregate number of shares which the corporation shall have authority to issue is 500. Each share has a par value of \$1.00. Preemptive rights are denied.

FIFTH: **Registered Agent.** The address of the initial registered office of the corporation is 2335 NW 107 St., Miami, Fl 33167. The registered agent at this address is Sharon Troy.

SIXTH: These Articles of Incorporation may be amended by the board of directors adopting a resolution setting forth the proposed amendment. The proposed amendment must then be ratified by a majority vote at a meeting of the shareholders that was properly called and held in Florida in accordance with the provisions of the bylaws.

SEVENTH: Any director or the entire board of directors may be removed by the shareholders, with or without cause, at a special shareholder meeting called expressly for that purpose in accordance with the requirements for such a meeting as is specified in the bylaws. The method of electing directors shall be stated in the bylaws.

EIGHTH: The **principal office** of the corporation is 2335 NW 107 St., Miami, Fl 33167.

NINTH: The **mailing address** of the Corporation is 2335 NW 107 St., Miami, Fl 33167.

ELEVENTH: The name and address of the incorporator is: Sharon Troy, 2335 NW 107 St., Miami, FL 33167.

These Articles of Incorporation are hereby executed by the incorporator on this 13 day of March, 1997

Sharon Troy  
Sharon Troy

STATE OF FLORIDA ]

ss:

COUNTY OF DADE ]

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared Sharon Troy who is either personally known to me or who produced a valid Florida driver's license and who is known to me to be the person described in and who executed the foregoing instrument and acknowledged before me that he or she executed the same.

WITNESS my hand and official seal in the County and State last aforesaid on \_\_\_\_\_ 19\_\_\_\_

NOTARY PUBLIC STATE OF FLORIDA

\_\_\_\_\_  
(Type, Print, or Stamp name)

\_\_\_\_\_  
(Serial Number, if any)

REGISTERED AGENT'S  
ACCEPTANCE OF APPOINTMENT

I, Sharon Troy, hereby accept my appointment as registered agent for the The Advance Learning Center, Inc. a Florida for-profit corporation.

Sharon A. Troy  
Sharon Troy

Date: 3/13/97

97 MAR 13 PM 6:34  
NOTARY PUBLIC  
STATE OF FLORIDA