P980000 47560

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

SUBJECT:	READ	Right: LE, (Proposed corpor	ARNING CEN rate name - must include suf	TERS, INC.	_
			7	'00002535 -05/27/981 *****78.75	.857—6 01005-019 *****78.75
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :					
Filing		₹78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
			ADDITIONAL COPY REQUIRED		
FROM: Anthony MC INTURE Name (Printed or typed)					
1999 UNIVERSITY DRIVE SUITE 202 TO SER AND AND AND SER SON 27 FLAR					
	Co	ORAL SPRINGS	5, FL 330 State & Zip		<u>~~</u>
		954-755-	9855	FSTA	VED VED

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

READ RIGHT! Learning Centers, INC.

PRINCIPAL OFFICE ARTICLE II

The principal place of business and mailing address of this corporation shall be:

1999 UNIVERSITY DR. Suite 202 CORAL Springs, FL 33071

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1.000,000

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Anthony MCINTYRE 1999 University DR # 202 CORAI SPRINGS FL 33071

ARTICLE V **INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation are:

AnThony MC INTYRE 1999 University DR #202 CORAL SPRINGS, FL 33071

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations, of my position as registered agent

Signature/Registered Agent